
Interim Deputy Chief Executive's report on organisational performance
March 2023

Executive Summary

This paper provides the Council with updates on the organisation's performance since the February 2023 Council meeting.

The report includes narrative updates on specific projects and activities for the Council to note, stakeholder engagement activity, regulatory development, organisational development and an update on Covid temporary registration.

As this is a quarterly edition of the report, it includes KPI, Corporate Plan and Strategic Risk reporting.

Appendices

- A – List of the Interim Deputy Chief Executive's meetings in the reporting period
 - B – KPI dashboard and performance data
 - C – Corporate Plan 2022-23 deliverables tracker update
 - D – Strategic Risk Register March 2023
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Previous consideration	This is a standing item, considered at each Council meeting. As previously agreed by Council the March, July, September and December reports contain KPI data as well as the Strategic Risk Register and Corporate Plan tracker.
Purpose of report	The Council is asked to discuss the report.
Next steps	The next report will be received in May 2023.
Strategic priority	This report is relevant to all strategic priorities.
Financial and resource implications	None as a result of this paper.
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Interim Deputy Chief Executive's Organisational Performance Report – March 2023

Contents

1. [Interim Deputy Chief Executive's Organisational Assessment](#)
2. [Stakeholder Engagement](#)
3. [Regulatory Performance](#)
 - 3.1 [Registration](#)
 - 3.2 [Fitness to Practise](#)
 - 3.3 [Education](#)
4. [Policy and Standards and Professional Liaison](#)
5. [Equality Diversity and Inclusion](#)
6. [Corporate Enablers](#)
7. [Covid Temporary Register](#)
8. *Appendices*
 - A – [Interim Deputy Chief Executive Meeting List](#)
 - B – [Key Performance Indicator Dashboard & Data](#)
 - C – [Corporate Plan 2022-23 Milestone Tracker](#)
 - D – [Strategic Risk Register](#)

1. Reflections on 2022-23 and the plans for the year ahead

This is the last meeting of Council before the end of the 2022-23 financial year. It is important to reflect on what has been achieved this year as we finalise the Corporate Plan and budget for 2023-24.

As Council will note included in the Corporate Plan 2023-24 paper on the agenda today, is an appendix reporting on our success in delivering the 2022-23 Corporate Plan milestones. In summary, we achieved 80% of the milestones in our 2022-23 Corporate Plan (compared to 85% in the previous year). The Executive team are proud of this achievement and the work of our colleagues across the HCPC to make this happen, alongside our essential business as usual activity. This achievement also builds on the year before (which was the first year under our five-year Corporate Strategy) as we modernise and improve how we regulate.

There were 10 areas of work (20% of the milestones in our 2022-23 Corporate Plan) that did not progress as planned this year. As set out in the final report of the milestone tracker at Appendix C of my report, a number of these relate to our work on data. Our Programme of Data Excellence has commenced but some key milestones have not completed as planned. This was in part due to additional work being required to improve data quality as well as our capacity. I believe we have learned from this and the proposed Corporate Plan for next year is more realistic and factors in getting the basics right in terms of our data quality and prioritising our analysis work mindful of the resources we currently have.

There have been many achievements this year, but I want to highlight a couple that in particular have had a positive impact on how we regulate. Firstly, our commitment to equality, diversity and inclusion (EDI) – including how we capture data through our registration system and how we use that data resulted in us achieving the Professional Standards Authority's (PSA's) EDI Standard of Good Regulation for the first time.

We also moved our core registration application processes online and made further improvements to our engagement activities with professional bodies and unions during registration renewal periods. This has resulted in a significant improvement in our registration performance as demonstrated in our Key Performance Indicators (KPI) Report at Appendix B.

Council is asked today to approve our Corporate Plan for 2023-24 and the budget which have been built together hand in hand this year. Considering our financial position, the need to set a balanced budget and our unwavering desire to continue to improve how we regulate, we have prioritised activities for this year's Corporate Plan based on a realistic assessment of what we can deliver with the funding and capacity we have.

We have highlighted what is contingent on the fee rise agreed by Council at its last meeting coming into effect, as well as being cognisant of regulatory reform following the announcement by the Department of Health and Social Care in February 2023 that the HCPC, along with the Nursing and Midwifery Council, are next in line for modernisation of our legislation.

This year we have structured our Corporate Plan around three key themes:

1. Improving the experience of registrants and others who engage with the HCPC
2. Contributing to sector wide workforce planning and resilience
3. Driving forward efficiencies and innovation in how we work.

These are areas that resonate with our stakeholders and I believe will help our stakeholders see how the activities we have planned for next year relate to issues that are important to them.

Crucially, the three themes and the activities in our Corporate Plan contribute to public protection. All our work is underpinned by our continued commitment to EDI.

2. Stakeholder engagement summary

The fee rise that Council agreed last month has been a significant part of our stakeholder engagement activity.

I understand that increasing our fees has not been a popular decision (even though it is absolutely necessary to protect the financial viability of the organisation). It has been important for us to be visible and accessible to our stakeholders. Immediately after the Council decision I personally spoke to senior colleagues from over 15 professional bodies and unions in one-to-one meetings. This was to inform them of Council's decision and the mitigations we have committed to putting in place should the fee rise be implemented. Our Chair and the Executive Director of Resources and Business Performance also spoke to a number of stakeholders, including the Allied Health Professions Federation board meeting.

The week after Council's decision we held two webinars for professional bodies. We have also been engaging closely with officials in the UK and Scottish Government on this matter as it now enters the legislative process. We have also contacted a number of parliamentarians following Council's decision to offer a meeting to discuss the changes to our fees and the rationale.

While the increase to our fees has been the focus of much of our recent stakeholder engagement we have also been continuing our work with stakeholders in other important areas. I have met with the Director for the NHS Workforce Plan to discuss the draft workforce plan and the HCPC's role in it. Colleagues across the HCPC have been working to provide our feedback on the plan. We have provided constructive feedback and championed the quality of education and training and the importance of retention.

A full list of my external meetings is at Appendix A.

In this quarter the HCPC has engaged with a number of external consultations. This included submissions to the Department for Business and Trade (DBT) on the 'Recognition of professional qualifications obtained in Norway, Iceland and Liechtenstein' consultation (in March) and the PSA Strategic Planning Consultation (in February). We are also carefully considering the consultation live at the time of writing on 'Minimum Service Levels in Ambulance Services' (deadline for responses is 4 May).

3. Regulatory Performance

3.1 Registration

In my February report, I outlined how the changes we made in registration in 2022 have had a positive impact on our performance and customer service. This is highlighted in the Key Performance Indicator (KPI) dashboard at Appendix B.

Customer service

Our contact centre continues to provide a good service. The telephone call answer rate was 99% in February 2023, achieving our KPI as we have done since October 2022. Our improved performance in responding to emails has been sustained at 2 working days in November 2022 and 1 working day during the period of December 2022 to February 2023. The KPI has been met since June 2022.

There is more to do to improve our customer service. We know that improving our services helps reduce the need for people to contact us by phone and email. Our Corporate Plan for next year includes making our registration system mobile and tablet friendly to further improve customer experience.

UK applications to join our Register

The team continue to manage UK applications to join our Register, from new graduates from our approved programmes, within service levels at all times. The team continues to realise the benefits of online applications and a dedicated UK applications team to manage this process. Performance against the KPI for UK applications has been consistently met this financial year.

International applications to join our Register

There continues to be a high volume of new online international applications, with an average of c.250 per week being received in the last four months. As at the end of February 2023, we have received over 13,000 international applications compared to 7504 for the same period in the 2021-22 financial year.

The KPI dashboard at Appendix B shows our continued improvement in the percentage of applications assessed and a decision made within our service standards. We provide a more detailed breakdown of our performance to the Education and Training Committee (ETC). The most recent report to ETC was earlier this month. That report showed that we have continued to meet our service level performance target of making a first assessment decision within 60 days since June 2022. Our performance has continued to improve and since November 2022 we have been providing a first decision in under 20 working days. This continued improved performance underpins the improved metrics shown in the KPI report at Appendix B.

We are also continuing our engagement activities to help understand future international registration demand as best we can and a more detailed update on our work in this area and the overall performance of our registration services was provided to the Education and Training Committee earlier this month.

Registration renewals

On 1 March 2023 the renewal period opened for Practitioner Psychologists. As of 15 March, 48% of Practitioner Psychologists have renewed their registration. At the same point at the last renewal period 33% had renewed. This follows a similar trend to other recent renewal periods and indicates that the system improvements we have made and our communication and engagement approach is supporting registrants to renew their registration earlier in the renewal window.

We will continue to engage with the relevant professional bodies before and during the renewal windows, this includes us sharing renewal rates periodically and providing information to support registrants to renew their registration throughout the renewal window.

3.2 Fitness to Practise

The KPI report shows our best pre-Investigating Committee Panel performance for the proportion of cases closed within KPI since we started reporting against this metric in June 2021. This reflects our focus on balancing the progression of both the older and younger cases through our process and also the positive impact of the improvement projects we have completed that focussed on timeliness of case progression. We are not complacent and while our recent performance is slightly improved against that measure there is still more to be done to improve our performance overall and to achieve this KPI.

At final hearing stages, our older cases are being concluded at a final hearing and we would therefore expect the proportion of cases concluded within KPI to be lower. Therefore performance against this KPI looks poor as a result of concluding our older cases. We have a model to forecast our trajectory that we share with Council periodically. To date this model has been accurate and shows this KPI will improve as the older cases are concluded but that will take time.

We have received no learning points from the Professional Standards Authority (PSA) this quarter to date, and have only received one formal learning point letter from the PSA year to date. The PSA issue learning points to highlight areas for improvement in the quality of final hearing decisions. Improving the quality of our final hearing decision has been a key element of our improvement programme.

The PSA are currently undertaking our performance review which includes an audit of FtP cases. We will report to Council the final outcome of that review later this year.

3.3 Education

We have made progress with reducing the number of outstanding education programme approvals, and this is reflected in the KPI dashboard with the lowest KPI for time taken to provide reports to the education provider since September 2022. We are outside of our KPI but the number of active cases has reduced from 120 in September to 89 at the end of February, and all remaining cases started in the last academic year will be submitted to the March Education & Training Committee Panel for consideration. The team are monitoring this closely to ensure we return this service to back within our KPI in the coming months. First and second line quality assurance checks indicate that our decisions continue to be of good quality

A key aim of our new quality assurance model was to engage with providers more at the beginning of the process and reduce the number of formal conditions applied with approving programmes as a result. We still hold programmes to the same high standards but work with them to address issues that could give rise to conditions earlier. In the last quarter we have not applied conditions to any programmes, which is indicative of the support we continue to provide to providers through the process.

4. Policy and Standards and professional liaison

Standards of Conduct, Performance and Ethics (SCPE)

The SCPE is one of, if not the most, important documents the HCPC publishes. The standards are integral to ensuring high quality professional practice in the 15 professions we regulate. Today Council is asked to approve the launch of a public consultation on proposed changes to the SCPE.

As well as the SCPE, we have reviewed the guidance on social media. We will begin reviewing the remaining guidance and online materials that support the SCPE, including on safeguarding and duty of candour, from September 2023 onwards.

Subject to Council's approval, as part of the consultation we are taking the opportunity to ask our stakeholders about how environmental sustainability should (if at all) be included in the SCPE. As individual citizens and as an organisation climate change is becoming ever more central in informing how we act and how we plan for the future. Many experts have stated that the climate emergency is a health emergency and therefore we believe it is the right time to ask our stakeholders about if, and how, environmental sustainability should be included in our Standards.

We are mindful that there are limits to what individual registrants can influence or change within their place of work. As part of our review, we are engaging with the Greener NHS and the Chief Sustainability Officer to ascertain ways that sustainability could be introduced as a Standard without overextending our remit.

As an organisation we are looking at our own environmental impact (see corporate enablers update below).

English language

The HCPC is in the early stages of a review into how we assess the English language proficiency of applicants who apply to join our Register who qualified outside of the UK. This review will focus on the types of evidence applicants will be able to submit to demonstrate their proficiency. We are also working collaboratively with other professional healthcare regulators in the UK to ensure our approach aligns where appropriate.

Professionalism and Upstream Regulation

Our Professional Liaison team have lead workshops at the NHS Education for Scotland conference: '*AHPs in Scotland: Be Appreciated, Be Connected, Be Inspired Hybrid Conference*' on the HCPC role in ensuring AHP graduates are fit for the future.

The work of the Professional Liaison team continues to generate engagement opportunities, for example the team met with the new Director of Care Quality and Professional Development at the Scottish Ambulance service and Kent Community Trust Professional Advisory group to map out a bespoke 'professionalism in practice' programme that meets the needs of their registrants and services.

Joining the UK Workforce sessions for newly registered international registrants continue to be well received. We are working with NHS England to target those registrants who are already living in the UK and who are looking for a job to connect them with international recruitment leads. We are also exploring international recruitment programmes in NHS Scotland to develop our connections.

We have continued to collaborate with stakeholders in delivering workshops and webinars. We have piloted a Joining the UK Workforce session with the NMC at West Suffolk Hospital covering the cultural differences that NMC and HCPC registrants may face when starting work in the UK. We are also working with NHS Resolution, the NMC and NHS England to deliver a webinar for primary care workers, focusing heavily on real life case studies. Similarly, we are collaborating with Health Education England and the Royal College of Occupational Therapists to deliver a session on supervision, accountability and delegation of activities.

We have piloted fitness to practise learning resource for diagnostic radiography students at the University of Salford. The content looks at professional behaviours and how these link to regulation and fitness to practise. This is part of our ongoing work on professional behaviours and culture.

Finally, we are expanding the reach of our service and deepening regional connections. By the end of March 2023, we will have a Professional Liaison Consultant working in all four countries of the UK.

5. Equality Diversity and Inclusion

We have continued our work to better understand the demographic makeup of our Register, by increasing the percentage of EDI data we hold for our registrants. We now hold EDI data for more than 50% of the Register which has been achieved by integrating data collection into online renewal and application processes.

We are currently developing fact sheets to illustrate the diversity of the Register. These fact sheets provide a breakdown of each profession by protected characteristics. We will use this data to inform our work and will also make it publicly available on our website.

In February, we held a meeting of our external EDI Forum, where registrants and their professional bodies meet with the HCPC to discuss EDI issues, and to provide input and challenge on work that requires a specific EDI consideration. The Forum discussed the revised SCPE for consultation and the initial phase of our review into our processes for assessing English language proficiency.

In May, we will be providing Council with our annual update on the progress made under our EDI action plan.

6. Corporate Enablers

Further progress has been made on downsizing our estate and optimising it for hybrid working since the last meeting of Council.

We have made more improvements in financial management and control – this includes a turnaround from a red internal audit report to a green-amber follow-up report. This was shared with the Audit and Risk Assurance Committee (ARAC) earlier in March. The reimplementation of our finance system is under way. There is more to do to complete that project and as Council is aware the start was delayed as we firmed up the scope. Further work is needed to continue to build resilience in the finance function but I am confident there has been significant improvement over the past year.

There has been good progress against our People Strategy, with lower staff turnover as set out in Appendix B. We now have regular Pulse Surveys to help us monitor organisational culture and this is discussed at the People and Resources Committee. Our approach to hybrid working and visibility of our senior leaders is a focus on our work.

In November 2022, we held a Council seminar on sustainability, which paved the way for work we have done on setting a baseline and action plan towards a net zero goal for the HCPC. As the SCPE consultation shows we are also beginning to work with our stakeholders and registrants on a wider agenda to promote sustainability in the health and care sector.

The Strategic Risk Register is provided at Appendix D – it has been updated to reflect the changes to the HCPC’s executive leadership team and the mitigations we have in place as well as other recent developments such as the fee rise decision and the announcement on regulatory reform. This was discussed in detail at ARAC earlier in March.

7. Covid Response

Temporary Register

The table below sets out the number of temporary registrants on each of the registers as of 1 March 2023. In summary there are 10,012 temporary registrants.

	Temporary registrants					
	England	Scotland	Wales	Northern Ireland	Other*	Total
AS	34	8	1	0	0	43
BS	1221	167	94	50	7	1539
CH	169	26	9	5	1	210
CS	241	36	13	5	0	295
DT	119	22	5	5	0	151
HAD	18	1	0	0	0	19
ODP	376	23	19	2	2	422
OR	75	8	6	1	0	90
OT	1516	177	85	52	11	1841
PA	791	168	139	35	12	1145

PH	763	114	44	18	17	956
PO	37	14	3	2	0	56
PYL	572	56	35	18	4	685
RA	1410	151	92	64	6	1723
SL	680	86	37	33	1	837
Total	8022	1057	582	290	61	10012

*Crown dependencies

As Council is aware the UK Government has confirmed that the Temporary Register will remain open for a further two years. At this meeting the Council is asked to approve our approach for the ongoing maintenance of the Temporary Register. The recommended approach includes seeking additional assurances (beyond what we have done to date) from temporary registrants to ensure the integrity of the Temporary Register now that it will remain open for a further two years. I believe the proposals are proportionate and they are in line with changes other regulators who also maintain a Temporary Register are making.

Interim Deputy Chief Executive – Andrew Smith

Meeting schedule period covering 04 January – 22 March 2023

NHS England: National Joint Strategic Oversight Group (NJSOG) Workshop	9 January 2023
Council of Deans of Health: Katerina Kolyva, CEO, meeting	9 January 2023
Department of Health and Social Care (DHSC) meeting, Phil Harper, Deputy Director – Professional Regulation	12 January 2023
KMPG: Amanda Woodhouse, meeting	17 January 2023
DHSC monthly meeting with the Regulatory Team	18 January 2023
Nursing and Midwifery Council meeting with Andrea Sutcliffe, CEO	19 January 2023
NJSOG meeting	23 January 2023
Chief Executives Officers & Registrars Board (CEORB) meeting	27 January 2023
Saxton Bampfylde meeting with Aidan Kennedy	2 February 2023
Healthcare Safety Investigation Branch - Roundtable with healthcare regulatory agencies on implementing safe space provisions	2 February 2023
Professional Standards Authority meeting with Mark Stobbs, Director Scrutiny & Quality	3 February 2023
College of Paramedics meeting with Tracy Nicholls, CEO	9 February 2023
General Medical Council meeting with Charlie Massey, CEO	10 February 2023
NJOSG Workshop – Planning strategic agenda items for FY 23/24	10 February 2023
Suzanne Rastrick Chief Allied Health Professions Officer for England – quarterly catch up	13 February 2023
Barny Leavers, Director for the NHS Workforce Plan, meeting on NHS Workforce Plan	13 February 2023
Delia Ripley (Deputy Chief Scientific Adviser for Health (Welsh Government)) and Ruth Crowder (Chief Allied Health Professions Adviser (Welsh Government) meeting	16 February 2023
NHS England, Dr Adrian Whittington, National Clinical Lead for Psychological Professions meeting	20 February 2023
Northern Ireland Government Meeting: Peter Barbour & Aislinn McAlister	20 February 2023
DHSC monthly meeting with the Regulatory Team	21 February 2023
CEORB Meeting	22 February 2023
College of Paramedics, Tracy Nicholls, CEO - HCPC fee consultation outcome meeting	23 February 2023
Royal College of Occupational Therapists, Steve Ford, CEO - HCPC fee consultation outcome meeting	23 February 2023
Society of Radiographers, Richard Evans, CEO - HCPC fee consultation outcome meeting	23 February 2023
Unite, Jane Beach, Lead Professional Officer, Regulation - HCPC fee consultation outcome meeting	24 February 2023

British Dietetic Association, Liz Stockley, CEO - HCPC fee consultation outcome meeting	24 February 2023
British Association of Arts Therapists: Gary Fereday, CEO - HCPC fee consultation outcome meeting	24 February 2023
Institute of Biomedical Science: David Wells, CEO - HCPC fee consultation outcome meeting	24 February 2023
British Association for Music Therapy: Andrew Langford, CEO - HCPC fee consultation outcome meeting	24 February 2023
Royal College of Speech and Language Therapists: Kamini Gadhock, CEO - HCPC fee consultation outcome meeting	24 February 2023
British Psychological Society: Sarb Bajwa, CEO - HCPC fee consultation outcome meeting	24 February 2023
British and Irish Orthoptic Society, Veronica Greenwood, CEO - HCPC fee consultation outcome meeting	24 February 2023
HCPC fees consultation outcome webinar for professional bodies	28 February 2023
HCPC fees consultation outcome webinar for professional bodies	1 March 2023
Association of Educational Psychologists, Cath Lowther - HCPC fee consultation outcome meeting	1 March 2023
Healthcare Improvement Scotland's Sharing Intelligence for Health and Care Group meeting	1 March 2023
Unison: Celeste Laporte and Gary Collins - HCPC fee consultation outcome meeting	1 March 2023
Royal College of Podiatry, Paul Chadwick, Clinical Director - HCPC fee consultation outcome meeting	2 March 2023
Healthcare Safety Investigation Branch, Dr Rosie Benneyworth, Chief Investigator, introductory meeting	10 March 2023
GMB union, Rachel Harrison, National Secretary for the Public Services Section – HCPC fees consultation outcome meeting	10 March 2023
Nursing and Midwifery Council, Andrea Sutcliffe, CEO and David Warren, Chair meeting	13 March 2023
Professional Standards Authority monthly meeting	14 March 2023
DHSC monthly meeting with the Regulatory Team	16 March 2023
General Optical Council, Leonie Millner, CEO meeting	17 March 2023
Unite regular catch-up meeting	21 March 2023
Catherine Ross, Scotland's Chief Healthcare Science Professions Officer meeting	21 March 2023
GMB regular catch-up meeting	21 March 2023
Unison regular catch-up meeting	22 March 2023

Interim Deputy Chief Executive's report on organisational performance – March 2023

Appendix B

- Key Performance Indicators Dashboard
- Register Demographics
- Media Reach Metrics

Key Performance Indicators dashboard

FTP

Measure	KPI 1 - the proportion of cases concluded at each stage that are within KPI												Period	March 23
What it tells us	<p>1.70% of cases concluded pre-ICP (threshold and ICP decisions) within 33 weeks of receipt 2.70% of cases concluded at a final hearing (including cases resolved by consent) within 39 weeks of the decision by the ICP that there is a case to answer.</p> <p>This provides a view of the age profile of cases that have progressed through the fitness to practise process and the timeliness of how cases are progressed to a final decision point. Metrics relating to the age profile of our open caseload are reported separately to Council in the FtP Performance reports. RAG: R: <60% A: 60-70% G: >70%</p>													
Reporting period commentary	Closures at the pre-ICP stage of the process have remained under 50% over the last year, but since October there has been an increase in the proportion of cases being concluded within KPI. In February we closed more cases within KPI at the pre-ICP stage for the first time since February 2022. This reflects our focus on balancing the progression of both the older and younger cases in the system. At final hearing stages, more older cases are being concluded at a final hearing and we would therefore expect the proportion of cases concluded within KPI to be lower.													
2022-23		Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	
1: Pre ICP	%	44%	44%	46%	36%	21%	31%	27%	34%	44%	50%	50%	62%	
2: Final Hearing	%	6%	0%	19%	21%	16%	22%	24%	10%	16%	13%	0%	9%	
2021-22		Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	
1: Pre ICP	%	N/A	N/A	N/A	51%	48%	55%	48%	48%	37%	51%	40%	56%	
2: Final Hearing	%	N/A	N/A	N/A	29%	4%	13%	7%	6%	5%	27%	38%	0%	

Measure	KPI 2 - S.29 appeals and learning points				Period	March 23			
What it tells us	This includes data and narrative on the number of final fitness to practise decisions appealed to the High Court by PSA under their S29 powers and the number of new PSA s29 learning points received. This provides a view of the quality of our fitness to practise decisions and assurance that those decisions are sufficient to protect the public.								
Reporting period commentary	<p>In February we received notification that the PSA had applied to the High Court to appeal a final hearing decision. This matter is still at an early stage of the appeal process. The number of S29 appeals received year to date is lower than in previous years.</p> <p>In Q3 we received four learning points from the PSA, which is consistent with the previous quarter. We have not received any formal learning point letters in this quarter. In Q4 to date we have not received any learning points. PSA issue learning points to highlight areas for improvement in the quality of final hearing decisions. Improving the quality of our final hearing decision has been a key element of our improvement programme.</p>								
2022-23		Q1 Apr-Jun		Q2 Jul-Sep		Q3 Oct-Dec		Q4 Jan-Mar	
S.29 Appeals	Number	0		1		0		1 - provisional	
PSA Learning Points	Number	11		3		4		0 - provisional	
2021-22		Q1 Apr-Jun		Q2 Jul-Sep		Q3 Oct-Dec		Q4 Jan-Mar	
S.29 Appeals	Number	1		0		0		0	
PSA Learning Points	Number	10		5		7		7	

Education

Measure	KPI 3 - Education Quality and Timeliness												Period	March 23
What it tells us	<p>1. Less than 20% of assessments resulting in conditions / formal requirements 2. 30 days or less to provide process reports to the education provider from conclusion of quality activities</p> <p>Measure 1 will tell us whether we have worked effectively to help providers meet our standards and frontloaded addressing issues with providers, rather than setting formal requirements later in the process. RAG rating: R >25%, A 20-25%, G <20%</p> <p>Measure 2 will tell us whether we deliver reports to providers in a timely manner and have a team in place which is capable and supported to produce high quality reports. RAG rating: R >36, A 31-35, G <30</p>													
Reporting period commentary	<p>For measure 1, we have continued to support providers well through the process to facilitate providers fixing issues earlier in the process rather than resorting to formal conditions.</p> <p>For measure 2, our performance at the end of February was our best performance since October 2022, which reflects our focus on reducing the backlog of cases from last year. We expect this to continue in the data for March and April as we conclude those outstanding cases, but beyond that we expect to return to KPI in this area.</p>													
		Nov-22	Dec-22	Jan-23	Feb-23									
1	%	0	0	0	0									
2	days	63	61	91	58									
		Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	
1	%	0	0	0	0	0	0	0	0	0	8	N/A	0	
2	days	15	N/A	29	52	8	25	35	41	40	30	N/A	21	

Registration

Measure	KPI 4 – Registration responsiveness												Period	March 23
What it tells us	<p>1 - Decision on 95% of all UK registration applications within 10 working days 2 - Decision on 95% of all international registration applications within 60 working days 3 - Answer 90% of telephone calls 4 - Respond to emails within 5 working days</p> <p>Responsiveness provides Council with a view of the customer service (timeliness) received by registrants. The breakdown of the register is included in the accompanying performance data to enable Council to maintain awareness of the size and make up of our registrant population. ETC receive more detailed Registration performance data. KPI 1 and 2 R: <80%, A: 81-94%, G: >95% KPI 3. R: <70%, A: 70-89%, G: >90% KPI 4 R: >11 days, A: 6-10 days, G: <5 days</p>													
Executive commentary	<p>UK application: Performance against our service standard for UK applications has been consistently met since February 2022 and throughout the summer peak. The monthly performance median has remained within the 10 working days service standard. Moving to an online platform and establishing a dedicated UK application team has contributed to this performance.</p> <p>International applications:</p>													

	<p>We continue to receive high volumes of international applications. Between 1 April 2022 and end of February 2023 we received 13,250 international applications. This is a 130% increase on the same period in 2021-22 (7,504 international applications received in that period).</p> <p>As reported to ETC we have continued to meet our public service level performance target for median processing of applications to a first assessment decision within 60-working day target since June 2022. This positive progress is a result of the surge capacity support introduced between February and August 2022, the introduction of online applications and setting up dedicated international registration teams.</p> <p>Calls: The telephone call answer rate was 99% in February 2023. We have been meeting our service standard since October 2022 following the introduction of the cloud-based telephony system, which provides greater flexibility, and a new approach to training for the team.</p> <p>Emails: Our improved performance against our target of 5 working days for emails has been sustained at 1 working day during February 2023. We have been achieving the KPI for emails since June 2022.</p>													
	2022		Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22*	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23
	1: UK registration	%	96	100	100	99.5	99	100	100	99	100	100	100	100
	2: Int registration	%	0	16	33	58	74	77	68	71	87	85	88	86
	3: Calls	%	69	73	75	75	62	81	85	96	98	99	99	99
4: Emails	working days	17	9	8	2	3	2	3	2	2	1	1	1	

Customer Service

Measure	KPI 5 - Customer service: Number of complaints and % upheld												Period	March 23
What it tells us	This provides insight into potential customer service and performance issues. Narrative will be vital for Council to probe and should include information on corrective action taken. Upheld RAG - Green <50 Amber 50-59 Red >59													
Executive commentary	The number of complaints received has continued to remain steady since the spike in complaints in May and June 2022. As the majority of the complaints received are about the Registration department, this reflects the improved performance in that department. However, the bulk of the complaints received in the Registration are still from international applicants about issues and delays with the process. For Fitness to Practise there are fewer complaints and the themes are more spread, but encompass delays with investigations, communication issues and threshold decisions to close cases.													
Year to date		Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-24	Monthly average
	Number	49	40	127	74	48	51	49	54	48	29	46	41	54
	% upheld	59	59	42	60	54	62	61	56	55	42	66	N/A	56
Previous years		Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Monthly average
	Number	66	57	43	78	50	68	56	63	95	39	63	46	60
	% upheld	62	63	55	33	48	53	66	53	42	44	72	54	54

Professional practice and insight

Measure	KPI 6 - Professional practice and insight: 60% of registrants said their practice would change as a result of information gained through a professional liaison learning event											Period	March 23
What it tells us	This measure focuses on outcomes which highlight the impact of our engagement. Engagement and media reach dashboard to be provided in performance report. Target 60%												
Executive commentary	During November through February, we delivered four sessions of Joining the UK workforce, a webinar specifically around supporting new international registrants in preparation for practicing in the UK. During this period, we also delivered our final #myhpcstandards sessions and ad-hoc engagements with NHS trusts.												
Year to date		Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-24
	%	89	88	81	90	94	N/A	81	90	86	81	81	80
		Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22
	%	54	47	49	N/A	85	N/A	80	100	70	N/A	71	81

Finance

Measure	KPI 7 - Finance: Performance against budgeted operating expenditure in range of 97.5% to 102.5%											Period	March 23
What it tells us	Indicates the grip and control in place and accuracy of forecasting. Measure will be the full-year forecast variance against the full-year budget moving from YTD.												
Executive commentary	As at 31-Jan-23 actuals are matching forecast due to time constraints in consolidating figures as we are in the midst of reimplementing our finance system – Microsoft Dynamics Business Central.												
Year to date	(,000)	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23
	YTD Actual	31,688	-	5,260	8,458	10,680	13,738	16,435	19,311	22,349	25,010	27,852	-
	YTD Budget	-	-	5,753	8,483	-	-	-	-	-	-	-	-
	YTD Forecast	31,788	-	-	-	11,069	14,196	16,680	19,253	22,336	25,217	27,852	-
	YTD Variance	100	-	493	24	389	458	245	(58)	(13)	207	0	-
	Actual as % of budget	99.7%	-	91.4%	99.7%	96.5%	96.8%	98.5%	100.3%	100.1%	99.2%	100.0%	-
Previous year	(,000)	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22
	YTD Actual	28,062	2,407	5,002	7,768	10,060	12,957	15,752	18,134	20,989	23,429	25,305	28,134
	YTD Budget	-	2,924	5,757	8,721	10,328	13,092	15,998	18,397	20,816	23,211	25,631	-
	YTD Forecast	26,744	-	-	-	-	-	-	-	-	-	-	28,557
	YTD Variance	(1,318)	517	755	953	268	135	245	263	(173)	(218)	326	423
	Actual as % of budget	104.9%	82.3%	86.9%	89.1%	97.4%	99.0%	98.5%	98.6%	100.8%	100.9%	98.7%	98.5%

Information technology

Measure	KPI 8 - Availability of core IT systems Target: >99.5%											Period	March 23
What it tells us	Measure is based on actual hours of availability per month vs total number available. Given the reliance of our core functions on IT systems, this measure indicates the reliability of the IT infrastructure. Additionally, our registrants and stakeholders predominately interact with us via our IT systems, and we have a statutory duty to ensure our online register is consistently available.												
Executive commentary	There has been no downtime or significant disruption to key systems since November 2022.												
Year to date		May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23		
	Availability %	99.4%	99.99%	99.9%	100%	99.9%	99.7%	100%	100%	100%	100%		
Previous year		May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22
	Availability %	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100%	100%

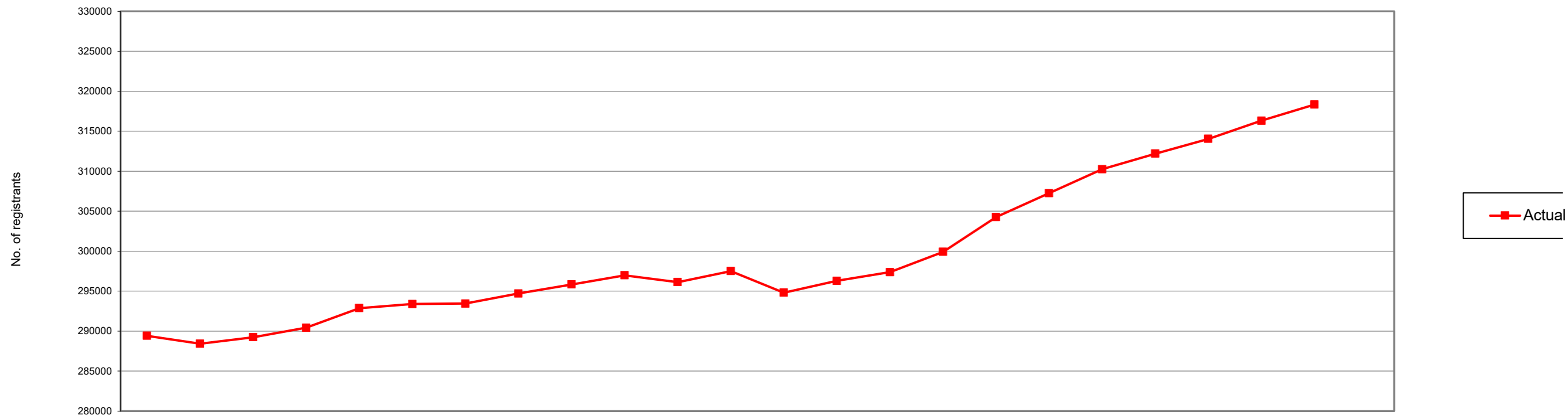
Measure	KPI 9 – Security Score Target: >80%											Period	March 23
What it tells us	Secure Score in Microsoft Defender for Cloud is a metric used to score the overall Azure Resources/On-prem Server security posture for HCPC. The changes in the "Defender score" needs to be taken into context, as a change to the score could relate to new updates, security framework changes or Infrastructure changes within the HCPC's environment.												
Executive commentary	Significant progress has been achieved on the Security Score, which peaked at 99% in December. The score fluctuates constantly due to new security patches and other changes to key systems, meaning ongoing maintenance is required.												
Year to date		Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23
	Availability %	77%	89%	80.5%	89%	88%	91%	93%	93%	96%	99%	98%	93%

HR

Measure	KPI 10 - Voluntary staff turnover Target: <21%											Period	March 23
What it tells us	This will be based on permanent establishment leavers and not FTCs. This provides an indicator that could point to cultural issues. PRC considers more detailed HR and internal EDI metrics. (Figure is a rolling year to date total not the turnover in that quarter in isolation) Green 21% or less / Amber 22% - 27% / Red 28% or over												
Executive commentary	We continue to see a reduction in voluntary turnover compared to the data from Q3. However, as we are still within Q4, the data can likely change once we reach the end of March. However, the reduction in turnover is a positive step and illustrates the stability we are heading towards. We hope to be able to continue in that direction and further reduce staff turnover.												
FY 2022-23		Q1			Q2			Q3			Q4		
	%	23			16			17			15 (provisional)		
FY 2021-22		Q1			Q2			Q3			Q4		
	%	20			25			24			26		

Measure	KPI 11 – Recruitment and onboarding efficiency				Period	March 23
What it tells us	Time to hire is based on the advert going live to the appointee’s offer date. This measures how effective HCPC is in attracting and making an offer to the right talent, which has been an area of challenge in a competitive job market. Green 41 days or less / Amber 42 days – 52 days / Red 53 days or over					
Executive commentary	There has been a rise in the average days to hire between Q3 and Q4. This is due to two main campaigns being extended beyond the initial timetable as there had been challenges in finding suitable candidates.					
FY 2022-23		Q1	Q2	Q3	Q4	
	Average (days)	59	59	40	60 (provisional)	
FY 2021-22		Q1	Q2	Q3	Q4	
	Average (days)	81	65	44	27	

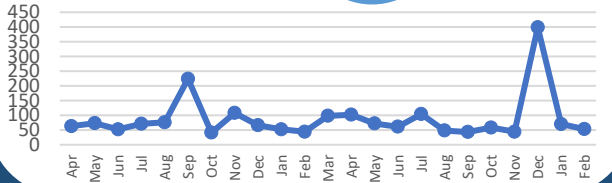
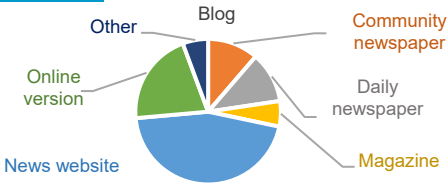
Number of Registrants by Profession April 2021 - March 2023



	2021			2022									2023									16/17 FYE	17/18 FYE	18/19 FYE		
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec				Jan	Feb
Arts therapists	4,811	4,823	4,836	4,851	4,934	5,018	5,097	5,144	5,171	5,187	5,206	5,216	5,211	4,908	4,939	4,957	5,071	5,136	5,202	5,274	5,299	5,337	5,358	4,026	4,322	4,432
Bio. scientists	23,875	23,973	24,102	24,198	24,384	24,417	24,569	23,061	23,457	23,729	23,915	24,109	24,246	24,458	24,572	25,047	25,413	25,652	25,919	26,174	26,480	26,804	27,078	22,902	22,395	23,284
Chirops/ pods	12,389	12,376	12,371	12,400	12,489	12,527	12,553	12,549	12,541	12,531	12,526	12,522	12,479	12,452	12,444	11,796	11,901	11,939	11,966	11,972	11,959	11,966	11,982	12,931	13,115	12,833
CI scientists	6,707	6,724	6,740	6,733	6,743	6,327	6,496	6,640	6,683	6,731	6,775	6,806	6,837	6,855	6,895	6,917	6,938	6,963	7,156	7,228	7,249	7,312	7,346	5,663	5,818	6,207
Dietitians	10,192	10,208	10,231	10,294	10,427	10,497	10,549	10,640	10,668	10,692	10,723	10,744	10,739	10,743	10,268	10,462	10,582	10,636	10,747	10,839	10,878	10,936	11,006	9,107	9,585	9,722
Hearing aid disps	3,390	3,411	3,421	3,431	3,461	3,496	3,528	3,554	3,559	3,579	3,611	3,631	3,635	3,639	3,661	3,477	3,568	3,622	3,686	3,736	3,768	3,814	3,845	2,593	2,908	3,047
OTs	41,338	41,380	41,413	41,473	41,863	41,978	39,225	40,492	40,690	40,886	41,028	41,142	41,210	41,287	41,419	41,750	42,228	42,518	42,768	43,013	43,158	43,318	43,503	38,080	38,183	39,925
ODPs	14,473	14,473	14,471	14,497	14,588	14,691	14,851	14,953	14,964	14,999	15,023	15,052	15,068	15,089	15,116	15,195	15,309	15,469	15,640	15,202	15,326	15,405	15,472	13,052	13,639	13,903
Orthoptists	1,512	1,509	1,507	1,503	1,424	1,445	1,453	1,460	1,466	1,474	1,476	1,480	1,480	1,481	1,482	1,495	1,507	1,518	1,526	1,535	1,538	1,541	1,544	1,451	1,440	1,496
Paramedics	31,137	31,244	31,262	31,413	30,701	31,201	31,705	31,922	31,988	32,186	32,284	32,440	32,531	32,673	32,915	33,275	33,781	34,206	34,495	34,703	34,789	34,976	35,182	23,992	25,465	27,686
Physiotherapists	58,348	58,478	58,596	58,813	59,872	60,374	60,868	61,152	61,289	61,467	61,625	61,773	58,461	59,441	59,903	60,801	62,017	62,756	63,361	63,934	64,468	65,105	65,717	52,915	55,132	55,695
Pract psychs	25,935	24,379	24,717	24,940	25,117	25,275	25,695	25,926	26,034	26,109	26,181	26,278	26,336	26,399	26,481	26,553	26,689	26,895	27,244	27,421	27,505	27,607	27,671	22,604	23,104	24,290
Prosth/orthotists	1,114	1,115	1,117	1,126	1,157	1,072	1,089	1,098	1,100	1,102	1,104	1,105	1,107	1,108	1,113	1,123	1,142	1,152	1,163	1,165	1,168	1,177	1,187	1,063	1,051	1,101
Radiographers	36,959	37,085	37,218	37,516	38,268	38,585	38,865	38,985	39,004	39,039	37,330	37,871	38,098	38,351	38,725	39,514	40,332	40,876	41,305	41,801	42,206	42,703	43,056	32,072	32,475	34,470
Social workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	91,944	96,497	94,453
SLTs	17,241	17,250	17,242	17,235	17,444	16,488	16,906	17,136	17,219	17,279	17,321	17,346	17,376	17,409	17,453	17,551	17,798	17,930	18,080	18,207	18,259	18,317	18,394	15,935	15,932	16,595
Total	289,421	288,428	289,244	290,423	292,872	293,391	293,449	294,712	295,833	296,990	296,128	297,515	294,814	296,293	297,386	299,913	304,276	307,268	310,258	312,204	314,050	316,318	318,341	350,330	361,061	369,139

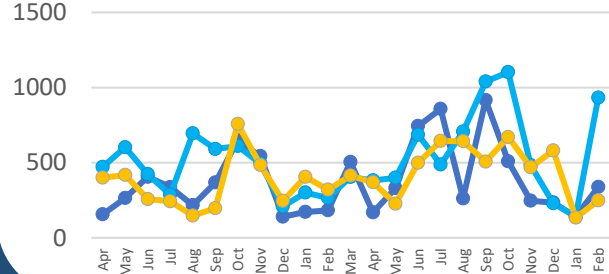
Media coverage

53 mentions

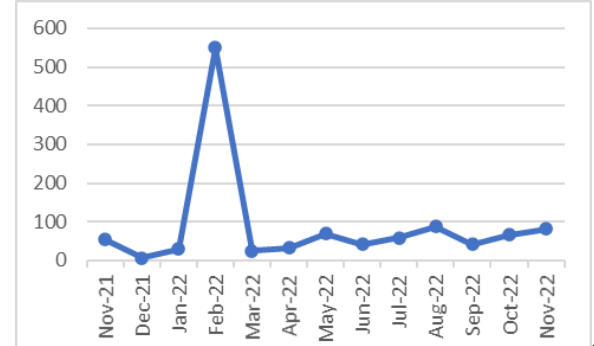


Social media engagement

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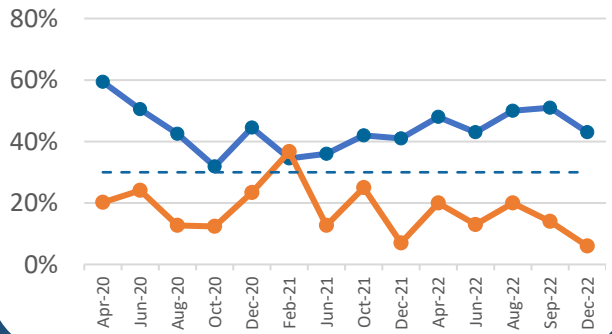


Policy queries



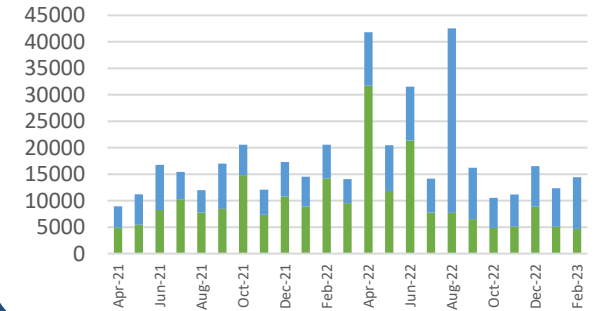
In Focus email

Open rate
Click-to-open rate



Blog & news views

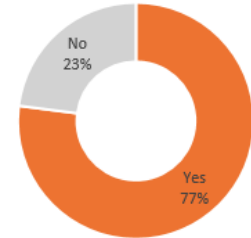
Blogs News



Safeguarding webinar

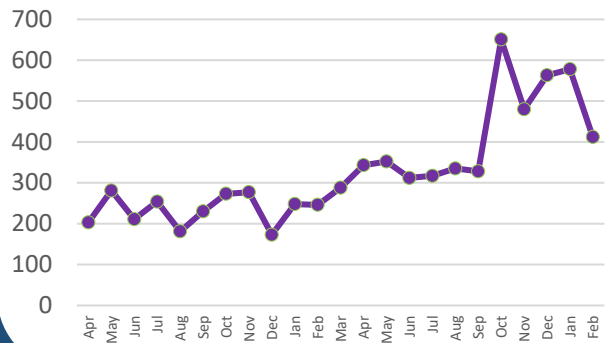
myhpcstandards

Will your practice change as a result of the information gained in this session?



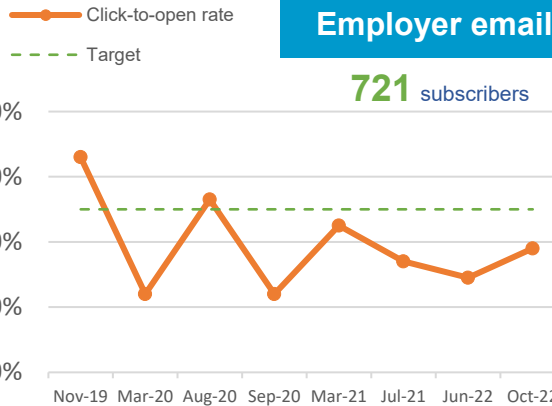
Employer hub

Visits



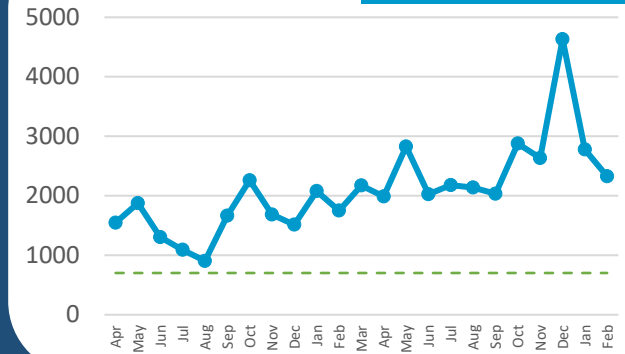
Employer email

721 subscribers



Student hub

Visits Target



Interim Deputy Chief Executive's report on organisational performance – March 2023

Appendix C

Corporate Plan 2022-23 - Deliverables Progress Report March 2023

Strategic theme 1- Continuously improve and innovate			Target delivery (Q)	Benefit measure	Benefit target (Q)	Rag and comment
		Key milestones				
Continuing improvement of our regulatory operating models	A1	Continuing to improve the quality and timeliness of case management: 1. Transition to frontloading (gathering more evidence earlier on in the FtP process) of case management with external legal provider(s) 2. Build capability and capacity to deliver frontloading in-house. 3. Commence frontloading of cases in-house.	1. Q1 2. Q1-Q3 3. Q4-1	<ul style="list-style-type: none"> Reduction in length of time from ICP to final hearing for frontloaded cases (target 26 weeks compared to current 29 weeks from ICP) Reduction in number of preliminary hearings and not well found cases where quality of evidence is a factor in the decision (reduction by 70% in year one for those cases that are frontloaded). Improved timeliness in the flow of cases out of triage Improved quality of case presentation and panel decisions measured through a reduction in PSA s29 learning points and DRG feedback. 	Q4 for external legal provider managed frontloaded cases. From Q1 2023-24 for in-house managed frontloaded cases.	On track for completion as per plan and will continue into next FY. Frontloading of case investigations with our providers commenced in July 2022. Commenced review of our operating model to support in-house frontloaded investigation.
	A2	Protection of Title (POT) review: 1. Review and benchmarking of current POT case management process. 2. Development of new process and KPIs 3. Delivery of training and guidance for teams	1. Q1 2. Q2 3. Q3	<ul style="list-style-type: none"> Streamlined and efficient process that delivers proportionate investigation and improved partnership working Reduction in length of time to conclude a POT case (where there is no prosecution) 	Q3 Q4	Review has commenced and will continue in to next FY.
	A3	Consolidating the benefits from the new Education QA model: 1. Review, quantify and report on the benefits of the new QA model, once it has operated through an academic year 2. Develop and report on a regular basis to ETC on quality measures. 3. Data model and process outcomes used to inform performance review selection for the 2022-23 academic year	1. Q3 2. Q3-4	<ul style="list-style-type: none"> Site visits only conducted where needed to assess standards, and in 10% or less of cases Fewer cases where conditions applied - approval process outcomes reduce from 9 months to 6 months Assessment of provider performance provides clear rationale for risk assessment <ul style="list-style-type: none"> Observations in 25% or less of cases Case outcomes accepted by the ETC panel in 90% of cases 	Q2-Q4	Complete, now part of BAU. Finalised quality reporting to ETC. Data model and process outcomes complete (July 2022).
	A4	Deliver future Registration Operating Model which includes the implementation of revised processes and an operating structure and better guidance on our registration processes.	Q1-4	<ul style="list-style-type: none"> For UK and readmission applications - achieve 10-day service standard throughout the year. For international applications achieve 60-day service standard from receipt of complete application to first assessment decision. Increase in service satisfaction amongst applicants and wider sector stakeholders. 	Q2 onwards Q3 onwards	Complete and the changes to reg operating model based on learning from pilot will be implemented Q1 2023-24. Currently meeting all KPIs, international application

						processing times at 88% (KPI 95%).
Pursuing technology enhancements to streamline key regulatory processes	B1	<p>Delivery of education provider self-service portal:</p> <ol style="list-style-type: none"> 1. Pilot and improve MUP portal 2. Develop support materials for external stakeholders 3. Launch portal to manage all provider interactions 	<ol style="list-style-type: none"> 1. Q1-2 2. Q2 3. Q3 	<ul style="list-style-type: none"> • Improved provider understanding of case / provider status • Reduction in provider queries related to case progression matters • Reduction in time spent managing documentation 	Q4	Complete. Education provider portal launched on 1 November.
	B2	Expand delivery of online Registration services to include UK and readmission applicants.	Q1- Q3	<ul style="list-style-type: none"> • Improved user experience for UK Applicants and those applicants returning to the Register • Increased EDI data capture • More efficient registration processing, reduction of temporary employee contracts / overtime needed to cover the peak UK application process for 6 months over the summer period (circa £100k savings) 	Q4	Complete UK Online portal launched June. Mandatory integrated EDI collection for implemented, and EDI capture for Online Readmissions process redesign currently on hold and will be implemented in the next release cycle and will now be linked to RtP policy review.
	B3	<p>Delivery of Phase 2 of FtP Case Management System. Including:</p> <ul style="list-style-type: none"> • Streamlined workflows for all case types including support for frontloading • Improved reporting functionality • Online FtP concerns form 	Q1-2	<ul style="list-style-type: none"> • Improved internal user experience, and external user experience for those referring concerns. • Improved operational data and management information. • EDI data capture relating to complainants 	Q3-Q4	On track for Q4 completion Sprint three of the development and build of the enhancements to the system went live in Feb 2023, work on remaining three sprints are due to conclude by end of Q4. Requirements gathering for online concerns and EDI capture has begun and a solution is being identified, likely to be delivered Q1 23-24.

Strategic theme 2 – Promote high quality professional practice			Target delivery (Q)	Benefit measure	Benefit target (Q)	RAG and comment
		Key milestones				
Maintaining and promoting high-quality professional Standards	C1	Publication and implementation of revised Standards of Proficiency (SoPs)	Q1	<ul style="list-style-type: none"> Updated SoPs improve clarity about our expectations for registrants and other stakeholders and support improved public safety Updated SoPs support our commitment to improving EDI in regulatory policy and ensure we are appropriately responding to public inquiries and developments in practice, including in relation to the impact of the pandemic. 	Q1 (publication) Q3 23-24 (implementation)	Complete, implementation ongoing. Revised SOPs published, implementation underway. Professional Liaison team delivered series of webinars in 2022 looking at key changes to SOPs, further events planned.
	C2	Review of Standards of Conduct, Performance and Ethics (SCPE) and launch consultation on any proposed revisions.	Q2 - Q3	<ul style="list-style-type: none"> SCPEs are up-to-date and continue to be fit for purpose, maintain registrants' high standards and help to secure public trust, confidence and expectations Ensuring appropriate EDI expectations in our SCPEs in line with the ambitions of our EDI strategy. 	Q3-Q4 Q1 2023-24 (publication)	On track for Q4 completion. There were delays due to resource pressures and competing priorities but it is on track for Council approval in March and public consultation will launch shortly after.
	C3	Initiate review of Standards of Education and Training	Q4	<ul style="list-style-type: none"> Stakeholder mapping and early engagement to ensure our review of SETs in 2023-24 is well planned and broadly informed 	Q3 2023-4	Work not yet started due to competing priorities and the focus on SCPEs. This is included in 2023-24 plan.
	C4	High quality programme of #myhpcstandards events to promote excellence in professional practice, e.g., duty of candour, sexual misconduct, reflective practice, supervision and professionalism, and some profession specific events based on evidence of risk	Q4	<ul style="list-style-type: none"> Increased engagement with registrants across our professions Registrants' understanding and embedding of standards improved, including new SoPs and guidance Supports HCPC's effective response to public inquiries 	Q1 2023-24	Complete and will continue into next FY. 2941 attendees to date.

Regulatory policy development	D1	Engagement with DHSC on regulatory reform as they develop GMC's legislation as a blueprint for our own.	Q2	<ul style="list-style-type: none"> • Legislation drafting takes account of HCPC's views, reducing the risk of an unworkable approach for the HCPC. • Assurance that HCPC is effectively prepared and engaged for the revision of our own legislation, rules, processes, guidance, policies and operational changes 	Q4	Complete and will continue into next FY. Continued to input into the drafting of the GMCs legislation, consultation launched 17 Feb and confirmation that HCPC will be one of the next regulators to go through reform.
	D2	Carry out preparedness for practice research	Q2-Q4	<ul style="list-style-type: none"> • Research will inform the joint HEE/HCPC preceptorship project. • Better understanding of the registrant experience entering the workplace for HCPC and stakeholders, to inform future activity • Identification of any professions with specific issues relating to readiness for practice within the preceptorship stage. 	Q4 2022-23 and 2023-24	Research underway and will continue into 2023-24. Expecting to complete final report end of 2023 calendar year.
	D3	Engagement and consultation on the development of preceptorship guidance	Q3-4	<ul style="list-style-type: none"> • Improved support for registrants as they enter practice • Value of regulation demonstrated to registrants at an early stage in their career • Established approach to successful joint working. 	Q4 onwards	On track for Q4 completion as per plan. Consultation closed December 2022. Council approval (February), publication imminent.
	D4	Review social media guidance and develop and consult on revised approach as required	Q3	<ul style="list-style-type: none"> • Registrants have a clearer understanding of our expectations in relation to the adherence to our standards and social media use • Improved evidence-base for decision making in relevant cases 	Q3 onwards	On track for Q4 completion. Included in SCPEs consultation alongside the standards. Professional Liaison service involved in sessions looking at social media issues with registrants.
Expanding our	E1	Expanded Professional Liaison Service, achieving presence in each UK nation.	Q3	<ul style="list-style-type: none"> • Increased engagement, education and influence of employers, registrants and other stakeholders across the UK. • Improved awareness and understanding of the delivery of health and social care in devolved nations enabling greater responsiveness. 	Q4	Complete as per plan.

E2	Development of employer hub and increase in subscriptions to Insights for employers (e-newsletter)	Q3	<ul style="list-style-type: none"> Enhanced support for, and influence with, employers. 	Q4	Complete as per plan. Click rate to employer hub increased in last 6 months supported by employer webinars, 710 subscribers to newsletters.
E3	Partner with identified employers and deliver a programme of employer events	Q4	<ul style="list-style-type: none"> HCPC is able to influence the creation of supportive cultures and working environments for registrants Better quality referrals from relevant employers 	2023-24	Complete as per plan. A series of employer webinars delivered in 2022, team now moving to personalised approach working collaboratively with employers to deliver events locally, now BAU.
E4	Increased number of 'Joining the UK workforce' events	Q1-Q4	<ul style="list-style-type: none"> Improved support for international registrants in applying our Standards Greater understanding of our Standards amongst those entering the UK workforce 	Q1-Q4	Complete, now BAU. Monthly webinars attract 200-300 newly registered international registrants. Working collaboratively with NHS England to promote their international recruitment programme.

Strategic theme 3 – Develop insight and exert influence			Target delivery (Q)	Benefit measure	Benefit target (Q)	RAG and comment
		Key milestones				
Launching our Programme for Data Excellence	F1	Agreed and assured official data set(s) incorporating all aspects of HCPC business.	Q4	<ul style="list-style-type: none"> Single version of data for official statistics. Mechanism for enabling and replicating cross functional data view in place. Enabling key I&I framework analysis Reduced reliance on, and costs of, external IT providers for certain data reporting tasks. 	Q3 onwards	Delay - Data Standards Officer has commenced this work but the milestone is not completed as per plan. This work will be included within 2023-24.
	F2	Agreed definitions, standards, processes and procedures for data.	Q3	<ul style="list-style-type: none"> Improvements to data quality. Analysis production time efficiency gains. Preparedness for future digital transformation work such as a data platform. 	Q3 onwards	Delay - Appointed data standards officer on a secondment from registration team, joined early Dec 2022 and has commenced this work. Work will complete in 2023-24.
	F3	Production of public facing dashboards and reports using assured data (F1) and agreed standards (F2).	Q4	<ul style="list-style-type: none"> Better public visibility of HCPC data. Improved stakeholder relations through more timely meeting of data/analysis needs. Increased value of investment in PowerBI software. 	Q4 onwards	Internal facing dashboards on track for completion by end of Q4, development of public facing dashboards will be 2023-24.
Delivering our Insight and Intelligence Framework	G1	Expand Insight & Analytics team through the establishment of a new data scientist degree apprenticeship	Q2	<ul style="list-style-type: none"> Sought after talent secured Improved analytical capability 	Q3	Complete
	G2	Analysis of FtP outcomes by diversity characteristics, focusing on age and sex, where data is available	Q1-Q2	<ul style="list-style-type: none"> Identification of potential unintended systematic EDI disadvantages in the FtP process for further exploration Analysis to inform our EDI action plan and priorities 	Q4	Two iterations of initial analysis produced and discussed, final iteration in workplan for next year.
	G3	Use FtP and other data to explore risks and establish characteristics of 'high-risk' registrants	Q1-Q4	<ul style="list-style-type: none"> Analysis enables more targeted upstream regulation and policy activities for HCPC and communication externally so others, including employers, can address key risk areas 	2023/24	Deprioritised and rescheduled for 2023-24 (Q4). Analysis work to understand risk of leaving registration complete, pending full follow up period for remaining professions.

Strategic theme 4 – Be visible, engaged and informed			Target delivery (Q)	Benefit measure	Benefit target (Q)	RAG and comment
		Key milestones				
Strengthening our organisational approach to equality, diversity and inclusion	H1	EDI action plan launched with suitable internal EDI oversight group	Q1	Realisation of the HCPC EDI strategic objectives.	Q1 onwards	Complete Action plan underway with regular monitoring via EDI working group and directorate EDI leads.
	H2	Internal audit of our organisation-wide approach to EDI, with actions to address any recommendations	Q4	Scrutiny of our work informs future planning and we are assured that we have robust plans to meet our objectives	2023/24	Complete. Audit completed (October), final report shared (February).
	H3	Introduce analysis of our Staff Survey results by protected characteristics	Q3	We understand how our workplace initiatives are experienced differently by groups of people who share protected characteristics	Q4 onwards	Complete Staff surveys (including hybrid working and pulse surveys) are now analysed by protected characteristics.
	H4	Introduce formal consideration of impact on our EDI objectives for all relevant ELT and Council decisions	Q2	Every relevant decision taken by HCPC leadership and Council is made with full understanding of its impact on our EDI objectives, and every opportunity to develop our EDI agenda will be utilised	Q2 onwards	Complete All papers are asked to include a brief commentary on EDI issues, seminar delivered to Council on EDI in June focusing on this piece.
Increase partnership working with our	I1	Expansion of devolved relationships management model to cover a wider range of stakeholders and 4 country relationship management	1. Q2	<ul style="list-style-type: none"> Improved responsiveness to stakeholders through formal structures and proactive relationship management Greater visibility and engagement with HCPC for key stakeholders in each of the four nations 	Q3 onwards	Complete Strategic Relationships Lead in post refreshed key messages document for Relationship Management and providing proactive reports into ELT's Strategy & Planning meetings.

	I2	Complete evaluation of initial year of devolved relationship management model	Q4	<ul style="list-style-type: none"> Learning and impact from first year identified and used to inform development of our strategic approach to stakeholder relationships management. 	2023/24	<p>On track for completion as per plan. Strategic Relationship Lead has commenced this piece of work, full review planned for end of calendar year.</p>
	I3	Planning and scoping for service user engagement project	Q3	<ul style="list-style-type: none"> A service user perspective will ensure that we are hearing from this hard to reach groups. 	2023/24 onwards	<p>Planning and scoping complete. Undertook a specific service user engagement project on the issue of the potential rise in registrant fees. This served as a model and template for ad hoc service user work, whilst the development of a longer-term engagement strategy was developed.</p>

Strategic theme 5 – Build a resilient, healthy, capable and sustainable organisation			Target delivery (Q)	Benefit measure	Benefit target (Q)	RAG and comment
		Key milestones				
Delivering year one of our new People Strategy	J1	Develop a comprehensive, strategic workforce plan which encompasses: <ul style="list-style-type: none"> Enabling agile response to resource demand Skills gap analysis Succession planning Increasing apprenticeships 	Q3	<ul style="list-style-type: none"> There is continuity of delivery Staff are motivated as they can see clear progression paths and are trained appropriately HCPC has the right skills in the right roles, with the number of vacancies reduced and less reliance on temporary staff in permanent roles. Turnover no higher than for other benchmark regulators. An increase in motivation and engagement as measured by the annual staff survey. 	2023/24	Turnover has reduced to 16% from 26%. Quarterly pulse surveys in place, measuring staff engagement. Succession planning will continue into 2023-24.
	J2	Review and relaunch our recruitment processes and induction programme to streamline onboarding and attract the right talent, as well as enhancing user experience and our employer brand.	Q2	<ul style="list-style-type: none"> Enhancing the pool of diverse candidates reducing dependency on Agency staff reduce onboarding time. new starters are given the right level of support through their induction. 	Q4	Complete as per plan. Induction programme complete (positive feedback from new starters), including update of e-learning induction, enhancements and developments with e - recruitment will take place in new FY.
	J3	Introduce Aspiring Leaders programme to develop our future leaders to ready them for management roles.	Q3	<ul style="list-style-type: none"> A year-on-year improvement in progression within the organisation by under-represented groups. The programme supports succession planning 	2023/24	Complete , programme introduced and went live February 2022 with 3 candidates on board.
Establishing our future hybrid working	K1	Undertake Hybrid Working pilot: <ul style="list-style-type: none"> Establish the desired future ways of working for HCPC, and the facilities and technologies needed to enable these Introduce a Hybrid working policy and supporting guidance 	Q2	<ul style="list-style-type: none"> Embedding an agile and new ways of working culture that support the health and wellbeing of employees, improve business performance enhance the employer brand 	Q3-4	Complete Policies all in place for hybrid working (HR). Office space being reconfigured to support pilot and HCPC laptops have been rolled out to all staff. Ongoing review of hybrid working.

	K2	Review and update the Digital Transformation Strategy	Q3	<ul style="list-style-type: none"> An updated and agreed strategy that provides a blueprint and roadmap for how technology and digital services will better enable HCPC to deliver its purpose and vision, improve the user experience of our registrants and improve efficiency and security. 	2023/24	Complete. Council approved updated strategy in December 2022.
	K3	Modernisation of our IT infrastructure including: <ul style="list-style-type: none"> The organisation's technical security framework and policies. Business continuity and disaster recovery arrangements Migration to a cloud- and mobile-first approach. 	Q3-4	<ul style="list-style-type: none"> We enable collaborative and partnership working and improve the resilience and cyber security of HCPC's systems and registrants' data. More productive and flexible collaborative working is enabled through the roll-out of industry-standard technology , embedding learning from HCPC's response to the pandemic. 	Q4	On track for Q4 completion and will be ongoing.
Ensuring our organisational sustainability	L1	Implement an upgrade to our financial system, so that we have a resilient, fit for purpose system that enables strong financial control and accountability and is better integrated with our core operational systems	Q4	Improvements in financial control and management, as measured by progress against internal and external audit recommendations. Clean statutory accounts delivered on time.	2023-24	Initiation completed. There were some delays to initiation, now underway and will complete in 2023-24.
	L2	Develop a Financial Sustainability Strategy	Q2	Financial Sustainability Strategy agreed, setting out projections for expenditure, income from fees and efficiencies, to ensure financial sustainability	Q3	On track for completion as per plan.
	L3	Establish a framework for change and benefits management	Q2	Qualitative and quantitative benefits of change and investment projects defined and tracked.	Q3	On track for Q4 completion. Approach for Benefits and Change framework identified and shared with PRC, regular updates provided to PRC. Benefits reporting dashboards in place , have embedded a benefit analysis at both investment case submission stage and at the point of initiation. Processes are now also mandated at closure to

						document a benefit realisation plan and lodge with closure documentation and be tracked by Business Change post project.
L4	Develop an Environmental Sustainability Strategy and implement baseline analysis	Q3	Baseline defined for measuring future improvements in our environmental impact; reduction achieved in year including from impact of utilities usage.	Q4		On track for Q4 completion. Engaged with consultants and across the organisation to develop our initial environmental emission calculations (covering a number of years), established a baseline position from which to measure future enhancements.

Strategic theme 6 – Promote the value of regulation		Target delivery (Q)	Benefit measure	Benefit target (Q)	RAG and comment	
Key milestones						
Improving registrant communications	M1	Develop a registrant communications strategy including mapping of registrant user journeys relating to communication and improving registration information and guidance	Q2-4	<ul style="list-style-type: none"> Clear and consistent approach to compassionate and inclusive registrant communication throughout the registrant journey Fewer contacts in relation to registration processes Perceptions survey outcomes in 2023/24 	Q4	On track for Q4 completion with agreed action plan for 2023-24.
	M2	Promote high quality professional practice through the development of our digital content and digital audience hubs for students and employers	Ongoing	<ul style="list-style-type: none"> Increased registrant and student engagement with our digital content, improving understanding of the standards and the role of HCPC in promoting public safety Increased engagements with and online support for employers 	ongoing	Complete and ongoing. The student competition drives registrants/students to relevant content (i.e meeting our standard page and student hub).
	M3	Deliver our first student competition	Q3	<ul style="list-style-type: none"> Greater awareness amongst students of HCPC, our role and value Improved understanding of HCPC standards in the next generation of registrants, supporting high-quality professional practice Increased visitors to our student hub, improving understanding of our Standards 	Q4	Complete. Student competition launched in May, closed in September. Prizes presented by Council in December. Now BAU.
Delivering the second year of our Registrant health & wellbeing strategy	N1	Increased support available for registrants involved in FtP cases, including development of a registrant support line	Q3-4	<ul style="list-style-type: none"> Improved information and support for registrants in the FtP process, including underrepresented registrants, promoting their wellbeing. 	From Q1 2023/24	On track for completion as per plan, launch end of March.
	N2	Lay Advocacy support provision for members of the public and witnesses (including registrants)	Q2	<ul style="list-style-type: none"> Enhanced support for members of the public and witnesses to participate in the FtP process. 	Q3 onwards	Complete. Lay Advocacy Service is now live.
	N3	Review of the HCPC's FtP tone of voice to be more compassionate and accessible.	Q1-Q3	<ul style="list-style-type: none"> Clearer and more compassionate communications with registrants and other parties involved in FtP, supporting registrant wellbeing. 	Q3 onwards	Work has commenced will complete in Q2 of next FY.
	N4	Educating and influencing employers in relation to FtP to make the right referrals and provide better support to those involved in FtP cases	Q3	<ul style="list-style-type: none"> Increased support to registrants going through FtP or involved in FtP cases (e.g., witnesses) Improvements in employer referrals – making the right referrals at the right time 	2023/24	Complete and ongoing Now part of ongoing programme of engagement with employers, BAU.

Interim Deputy Chief Executive's report on organisational performance – March 2023

Appendix D

Strategic Risk Register March 2023








HCPC Strategic Risks

Summary of strategic risks

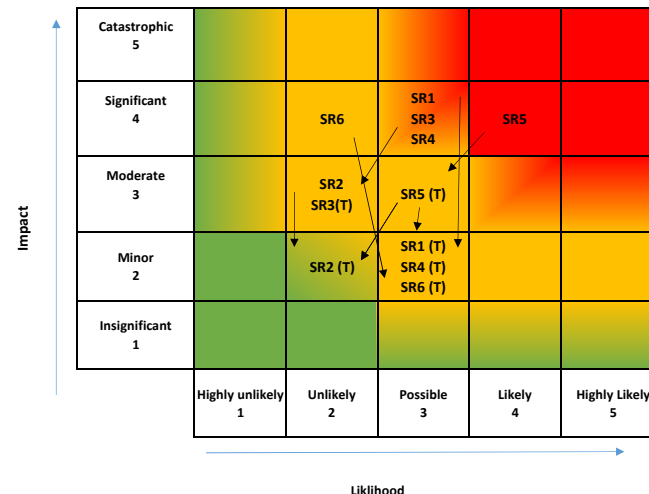
Strategy	Strategic Risks - High Level	Risk Description	Mar-23	Target Risk*
1 - Continuously improve and innovate - To improve our performance against PSA standards of good regulation and to innovate across all our regulatory functions to provide an enhanced user experience.	1. Our regulatory performance does not meet the expectations of our stakeholders and as a result stakeholders have negative experiences of our regulation	This includes the appropriateness of the timeliness and quality performance targets we set ourselves, being in line with the expectations of our stakeholders. This requires awareness of new developments within the regulatory sector and strong stakeholder engagement to ensure expectations are understood. This risk also relates to the experiences of those participating in our regulatory processes, for example registrants, witnesses, professional bodies and education providers.	12	6
2 - Promote high quality professional practice - Enable our professions to meet our standards so they are able to adapt to changes in health and care practice delivery, preventing harm to service users.	2. The HCPC's regulatory expectations are not appropriate or not understood by registrants and other stakeholders	This includes the quality and suitability of our standards and guidance in setting a threshold for safe practice which protects the public. It also includes how effectively we communicate our regulatory expectations, and the effectiveness of our professionalism and upstream regulation work.	6	4
3 - Develop insight and exert influence - Learning from data and research to inform our decision making and share insights to protect, promote and maintain the health, safety and well-being of the public.	3. We are unable to harness the benefits of the wealth of data we hold	This includes our effectiveness in collecting, maintaining, and utilising the data we need to be an intelligence driven regulator. It includes the effectiveness of our insight and intelligence work. It relies heavily on the work of the digital transformation and IT team and includes operational reporting in the Corporate Services team. It also relies on regulatory teams inputting information.	12	6
4 - Be visible, engaged and informed - We regulate, take and communicate decisions which are informed by a deep understanding of the environment within which our registrants, employers and education providers operate.	4. We do not understand our stakeholders needs and so are unable to be as effective a regulator as we can be	This includes how effectively we engage with our stakeholders and our credibility with them and how well we play our part in the wider system. It includes our EDI practice externally, the ability to respond and influence external drivers for change, like the impact of Brexit, devolution or a change in government as well as issues like workforce development.	12	6
5 - Build a resilient, healthy, capable and sustainable organisation - Employees feel valued and supported, and fully able to contribute. The organisation is resilient and able to quickly adapt to changes in the external environment.	5. The resources we require to achieve our strategy are not in place or are not sustainable.	This risk includes not securing the resources we need to be effective and / or not being efficient and effective in our use of our resources (resources include financial, knowledge, skills, culture, infrastructure). It includes the development of our culture, people and physical assets, our continued financial viability and the significant failure of key business processes.	16	9
6 - Promoting the value of regulation - The public, registrants, students and employers understand the value and importance of regulated health and care professionals.	6. HCPC is unable to realise the benefits of regulatory reform, or these benefits are significantly delayed	Regulatory reform is an essential component to helping HCPC realise its strategic ambition to provide a more human and compassionate regulation through the timely and proportionate disposal of fitness to practice cases.. Benefits also include greater flexibility to make process efficiencies, greater control over funding to enable financial sustainability in the long term and modernise governance structures. This risk includes the HCPC's capacity and capability to engage and influence regulatory reform effectively to ensure its benefits are realised, as well as the HCPC being viewed by government as a priority regulator for reform.	8	6

* Expected risk score post planned actions

Mitigation key

	Preventative
	Monitoring
	Detective
	Remedial
	Horizon scanning
	Best practice development
	Communication

Heat map of strategic risks - residual to target (T)



Strategic risk 1 - Our regulatory performance does not meet the expectations of our stakeholders and as a result stakeholders have negative experiences of our regulation

Risk summary

This includes the appropriateness of the timeliness and quality performance targets we set ourselves, being in line with the expectations of our stakeholders. This requires awareness of new developments within the regulatory sector and strong stakeholder engagement to ensure expectations are understood. This risk also relates to the experiences of those participating in our regulatory processes, for example registrants, witnesses, professional bodies and education providers.

Current risk influencers

- ✚ HCPC not meeting a number of PSA standards, and lost one registration standard in the 2021-22 review. Remediation of FtP standards is a longer-term effort due to case length.
- ▢ 2021-22 PSA performance report published, acknowledges progress is being made towards meeting standards.
- ▢ We have continued to remain within our service standard of providing a first decision on an international application within 60 working days - we have been within our service standard since Jun 22. Performance has continued to improve and since Nov 22 we have been providing a first decision in under 20 working days.
- ▢ Our contact centre has been providing an improved service, we have answered 96% or more of the telephone calls we have received and responded to emails within 2 working days since October 2022.
- ▢ Online applications project delivered online Int and UK applications. This has increased reg advisor processing productivity 100%.
- ✚ Government has delayed the closure of the temporary register, ongoing management of the register requires establishing a policy position, development is underway.
- ▢ Pre engagement from stakeholders on planned international recruitment in 2023-24 increases confidence in forward resource needs.
- ✚ Backlog of cases remain out of the first year of running the Education QA model. Stakeholders have experienced disruption in this period. Some KPIs have not been met over the last 9 months, but we are now seeing an increase in KPI compliance.
- ▢ The second tranche of FtP Improvement projects are in delivery, continued focus on embedding of tranche 1 benefits. Registrant support line will launch Q4, lay advocacy service of FTP participants in place.
- ✚ Tone of voice template review will not complete in Q4 as dedicated resource joined later than expected. Completion expected Q1 23-24.
- ✚ Teams will require additional resource to engage in regulatory reform preparation when commences for HCPC.

Mitigations in place

- 🔍 Enhanced second line QA plan for 2022-23 to review success of improvements in FtP (and registration & education) in addition to first line QA activity in place, such as the FtP DRG and panel member feedback following each hearing.
- 🔍 FtP improvement programme and governance in place, FtP improvement oversight board regularly meeting with attendance of PSA and DHSC. Regular self-assessment against PSA standards reported to Council.
- 🔍 Modern education QA model in place and embedding. Regular feedback sought and acted upon to improve process application and stakeholder experience. Education provider self-service portal in place improving experience of education stakeholders.
- 🔍 Cross organisational working group focused on PSA standards attainment and learning from other regulators good practice. Participation in inter-regulatory working groups to share good practice and discuss common issues, this is also provided through the use of a panel of legal providers for FtP matters with experience of how other regulators have improved processes.
- 🔍 Monitoring regulatory performance through performance reporting and KPIs.
- 🔍 Mature feedback and complaints service in place focused on extracting learning when things go wrong.
- 🔍 Surge support partner in place to process increase in international application volumes and minimise any delay to stakeholders. Online application capability in place for UK & international applications.
- 🔍 Regular learning and development for Partners and employees.
- 🔍 Registrant health and wellbeing strategy in place.
- 🔍 Wide range guidance on HCPC's regulatory processes available on our website.
- 🔍 Stakeholder perception survey baseline established.

Reporting period commentary

Risk owner – Laura Coffey became the acting Executive Director of Regulation in December 2022 and took on ownership of this risk.

Risk score – no change. While many positive improvements are being made and performance is improving, we are aware that we continue to not meet a number of PSA standards. Our 2022-23 PSA performance review is currently underway. Should the HCPC regain standards the risk score is likely to decrease.

Risk influencers – Registration service has improved and remained consistently within KPI since the summer 22. Introducing online services has helped in this as well as ringfenced teams dedicated to UK and international processing. Negative influences include the need to meet Education KPIs consistently.

Planned mitigations – We are on track to launch our first registrant support phonenumber by the end of Q4. Our lay advocacy service launched September 22 / POT review work was deprioritised based on competing demands and will take place in 23-24 / external frontloading has progressed well with proven benefits of this approach, creating in house capability for frontloading will take place in 23-24 / there have been delays to the progress of the tone of voice template letter review. A secondee from GMC joined us in late 2022 and is progressing on higher impact templates. However, this will not be completed in the 22-23 FY as planned and will continue into Q1 23-24.

Review date
Mar-23

Risk owner
ELT Lead - Acting Executive Director of Regulation

	Impact	Likelihood	Risk Score	
Inherent risk	5	x	5	25
Current risk	4	x	3	12
Target risk (planned mitigations in place)	2	x	3	6

No change

Risk Appetite

Our risk appetite for actions to achieve regulatory quality is open, our risk appetite for actions relating to compliance is measured.

This risk needs to be rated in the amber range to meet the risk appetite due to the measured appetite for compliance (PSA standards) we currently are not meeting a number of PSA standards and have a comprehensive improvement programme in place to address this.

Reaching the target risk score is dependent on

1. The launch and successful embedding of the new Education QA model.
2. Registration applications being online, volumes reducing and the review of the international process.
3. Changes from FTP improvement programme embed and evidence that improvement is lasting in medium – long term.

Current risk level is one level outside of risk appetite

Planned mitigations 2022-23

progress

- ☀️ Transition to frontloading of FtP cases (Q1-4) → External legal provider frontloading live in July. Started work on the operating model to introduce frontloading in house. This transition will occur in 23-24.
- 🏗️ Protection of title review (Q1-3) → Work has commenced and will continue into 23-24.
- 🏗️ Delivery of future Registration Operating Model including international process review (Q1-4) → Dedicated ringfenced teams in place for International and UK applications improvements showing in KPI compliance. Improved call handling arrangements and scripts introduced. Aiming to formally implement new operating model Q1 2023-24.
- 🔍 Expand delivery of online Registration services to include UK and readmission applicants (Q1-3) → UK Online portal launched. The mandatory integrated EDI collection for Registrants implemented. Readmissions process redesign currently on hold and will be implemented in the next release cycle and will now be linked to RTP policy review.
- 🏗️ Delivery of Phase 2 of FtP Case Management System → Work on remaining three sprints are due to conclude by end of Q4.
- ☀️ Increased support available for registrants involved in FtP cases, including development of a registrant support line (Q3-4) → Due to launch before end of Q4 2022-23.
- ☀️ Lay Advocacy support provision for members of the public and witnesses (including registrants) (Q2) → Complete - Service went live in Sept 22.
- 🔍 Review of the HCPC's FtP tone of voice to be more compassionate and accessible. (Q1-3) → A secondee is in place leading the review of template letters. Highest priority templates being prioritised. Progress impacted by delay in appointment. Review will continue into Q1 2023-24.

Strategic risk 2 - The HCPC's regulatory expectations are not appropriate or not understood by registrants and other stakeholders

Risk summary

This includes the quality and suitability of our standards and guidance in setting a threshold for safe practice which protects the public. It also includes how effectively we communicate our regulatory expectations, and the effectiveness of our professionalism and upstream regulation work.

Current risk influencers

- 4 country PL resource in place better enabling UK wide prevention engagement.
- Partnership working with HEE on Preceptorship principles (supporting new professionals transition to workplace) approved by Council and published. Implementation guidance in development.
- Revised SOPs implementation underway with new standards published and engagement undertaken.
- ⚠ Changes to SOPs may pose risk to registrant understanding of expectations if implementation plan not effective. Plan under active monitoring to mitigate.
- ⚠ Changing expectations of our professions' practice as a result of pressures on services, tech or societal events.
- ⚠ High volume of consultation activity in Q3-4 may risk stakeholder fatigue and lower quality engagement. Mitigated by targeted pre consultation engagement.
- Review of SCPEs and supporting guidance pre consultation engagement undertaken, to be presented to Council March 2023 for consultation launch.
- #mystandards 2022-23 events programme completed raising awareness of standards requirements.
- Preparedness for practice research has launched.

Mitigations in place

- 🔧 Public consultation process in place
- 🗣️ Engagement with key stakeholders/experts for widescale profession specific changes to standards.
- 🗣️ Guidance provided on meeting our standards, 'My Standards' webinar series.
- 🗣️ Dedicated website hubs for registrants, students, employers, members of the public, education providers.
- 🗣️ Policy and Communication teams at full complement.
- 🗣️ Policy enquiries function available to support understanding and application of our standards.
- 🗣️ Regulatory approach to advanced practice defined and agreed by Council.
- 🗣️ Professionalism Liaison service in place influencing employers, using knowledge to effect change through engagement and advice.

Reporting period commentary

Risk owner – Claire Amor (ED GAP) is responsible for the PPI directorate in the interim period while a substantive post holder is recruited.

Risk score – impact reduced. Significant standard reviews well progressed or completed, SCPE review ready for consultation to ensure current realities of practice are reflected, extensive engagement to inform development.

Risk influencers – increased professional liaison resource with consultants based in all 4 countries of UK enables greater reach to promote awareness of our standards expectations. Research on preparedness for practice has launched, engagement with registrants underway. Partnership working with HEE on Preceptorship principles (supporting new professionals transition to workplace) approved by Council and published. Implementation guidance in development.

Planned mitigations – Programme of PL events for 2022-23 completed / SETs review will not commence in 2022-23 due to lack of resource (given additional workstreams requiring policy focus, e.g. preceptorship and fees) / SCPE consultation will be launched before end 22-23 but delayed from expected September launch/ preceptorship principles developed, consulted on and approved by Council.

Review date

Mar-23

Risk owner

ELT Lead - Executive Director of Governance Assurance and Planning

	Impact	Likelihood	Risk Score
Inherent risk	5	x 5	25
Current risk	3	x 2	6
Target risk (planned mitigations in place)	4	x 1	4

Risk reduced

Risk Appetite

Our risk appetite for actions to achieve regulatory quality is open, the appetite for actions related to communication and profile is seeks.

This makes the risk appetite target level within tolerance if below red/amber. We are confident that our standards and guidance are fit for purpose and so this risk is currently within risk appetite.

However, to maintain that control onward reviews are essential to ensure standards are constantly kept under review to maintain relevance to changing practice and the wider health sector.

Current risk level is within risk appetite

Planned mitigations 2022-23

progress

- 🔧 Publication and implementation of revised Standards of Proficiency (SoPs)(Q1) → Implementation plan underway, with dedicated engagement, will continue until in force Sep 23.
- 🗣️ Review of Standards of Conduct, Performance and Ethics (SCPE) and launch consultation on any proposed revisions. (Q2-3) → To be presented to Council March 2023 for approval to launch consultation.
- 🗣️ Initiate review of Standards of Education and Training (Q4) → This will not be initiated in 2022-23 due to resource demands. Included in the 2023-24 Corporate Plan draft.
- 🗣️ High quality programme of #myhpcstandards events to promote excellence in professional practice, eg duty of candour, sexual misconduct, reflective practice, supervision and professionalism, and some profession specific events based on evidence of risk (Q4) → Complete - Programme of #myhpcstandards webinars for 2022-23 completed.
- 🗣️ Carry out preparedness for practice research (Q2-4) Engagement and consultation on the development of preceptorship guidance (Q3-4) → Research launched. Preceptorship principles consulted on and approved by Council.
- 🗣️ Review social media guidance and develop and consult on revised approach as required (Q3) → Will be presented to Council March 23 for approval to launch a public consultation.
- 🗣️ Expanded Professional Liaison Service, achieving presence in each UK nation. (Q3) → Complete – 4 country PL consultants in place.
- 🗣️ Increased number of 'Joining the UK workforce' events (Q1-4) → Completed and evaluated.
- 🗣️ Development of employer hub and increase in subscriptions to Insights for employers (e-newsletter) (Q3)Partner with identified employers and deliver a programme of employer events (Q4) → Completed and evaluated.

Strategic risk 3 - We are unable to harness the benefits of the wealth of data we hold

Review date
Mar-23

Risk owner
ELT lead - Executive Director of Governance Assurance and Planning

Risk summary

(benefits - better regulatory decisions, prevention, workforce planning, influencing the agenda) This includes our effectiveness in collecting, maintaining, and utilising the data we need to be an intelligence driven regulator. It includes the effectiveness of our insight and intelligence work. It relies heavily on the work of the digital transformation and IT team and includes operational reporting in the Corporate Services team. It also relies on regulatory teams inputting information.

Current risk influencers

- Findings of analysis of the attrition rates of the 15 professions published, contributing to wider workforce planning aims. Positive reception from stakeholders.
- Programme for data excellence commenced with work on data dictionary. IT team delivered successful first modules of new data platform, supporting EDI reporting, meeting the needs of the HEE data sharing project and improving access to core registration data.
- Data Engineer in place, data standards officer on secondment. A data migration specialist has been recruited on a temporary basis to support the Business Central project.
- While operational performance data reporting remains a manual process by and large, prototypes for some automated FTP reporting are in test.
- ✚ Our priorities for what we want data to do requires refinement to ensure this is realistic and achievable. The Insight and Intelligence framework is under review to ensure it better fits our priorities. A more achievable workplan for 2023-24 has been agreed.
- ✚ Ongoing risk of single point of failure for operational performance data reporting. Capability and capacity challenging and underutilisation of Power BI functionality.
- % of registrant EDI data held has improved with 61% of those renewing opting to provide data. System improvements delivered to make data collection mandatory as part of online registration processes.
- ✚ Quality and completeness of underlying data causing delays to analysis as significant cleansing work required. I&I team working with Ops teams to resolve.
- ✚ Policy development work not able to be supported with data due to data either not being held, being only partially held or being held in an unstructured way requiring cleansing.

Mitigations in place

- Publication of FtP, Education and Registration information and datasets through annual reports and FOI requests.
- Insights and Intelligence Framework agreed, setting out priorities and approach for data analysis.
- Dedicated resource for Analysis and Intelligence and Data Engineer in place.
- Publication of 1st in house statistical analysis of EDI data and FtP outcomes.
- Oversight board for Programme for Data Excellence in place.

	Impact	Likelihood	Risk Score	
Inherent risk	5	x	4	20
Current risk	4	x	3	12
Target risk (planned mitigations in place)	3	x	2	6

No change

Risk Appetite

Our risk appetite for actions to achieve regulatory quality is open, the appetite for actions related to communication and profile is seeks. These categories are not a direct link however and consideration is needed of the future expectations for data use in regulation and that we are at the start of our development in this area. Therefore, our appetite for this risk is to be within the amber scale rather than a higher appetite.

To reach our target we need to have the data platform in place to enable an analytics environment. We will require a more substantial I&A team, as well as more systematic data collection through online applications to increase the % of registrant characteristics data held.

Current risk level is one level outside of risk appetite

Planned mitigations 2022-23

progress

- | | |
|--|---|
| <ul style="list-style-type: none"> Agreed and assured official data set(s) incorporating all aspects of HCPC business. (Q3) Agreed definitions, standards, processes and procedures for data. (Q3) Production of public facing dashboards and reports using assured data and agreed standards (Q4) Analysis of fitness to practise outcomes by diversity characteristics, focusing on age and sex, where data is available (Q1-2) Use fitness to practise and other data to explore risks and establish characteristics of 'high-risk' registrants (Q1-4) Introduction of mandatory EDI data collection at renewal using online portal. (Q2-3) | <ul style="list-style-type: none"> Data standards officer has commenced this work but did not join the team until late 2022. Will complete in 2023-24. While work commenced in Q4 this remains ongoing and will complete in 2023-24. Dashboards on profession demographics and renewals have been produced, extending this into other areas will not be achieved this year. It is included in next year's corporate plan. While some initial analysis has been undertaken and discussed with Council, work has been delayed due to the quality of the underlying data, the team are working with the Ops teams to cleanse this data. It is included in the 2023-24 team workplan. This builds on initial analysis, It is included in the 23-24 team workplan. Complete. |
|--|---|

Reporting period commentary

Risk owner – Claire Amor (ED GAP) is responsible for the PPI directorate in the interim period while a substantive post holder is recruited.

Risk influencers - IT team delivered successful first modules of new data platform, supporting EDI reporting, meeting the needs of the HEE data sharing project and improving access to core registration data. We have also published a significant piece of analysis work in the reporting period, regarding register retention rates, this has been positively received by stakeholders in particular HEE and professional bodies. Ongoing issues with data quality and completeness continue to add to this risk. The data standards officer joined the team at the end of 2022 and is making good progress in developing cataloguing and defining data sets held. The ongoing issue of quality and completeness will be addressed in 2023, in corporate planning an active decision has been made to scale back some of the analysis work (though key pieces will continue) to enable limited resource to focus on getting our data to the strength it needs to be at for the future.

Planned mitigation – A number of planned mitigations are reporting as amber. This can be attributed to the resource limitations within the I&A team and the delay to a data standards officer joining to take forward the work on data quality and completeness. However, it should be noted that significant work undertaken connected to the HEE partnership on preceptorship was not in the corporate plan and the register retention analysis published received positive stakeholder reception.

Strategic risk 4 - We do not understand our stakeholders needs and so are unable to be as effective a regulator as we can be

Risk summary
This includes how effectively we engage with our stakeholders and our credibility with them and how well we play our part in the wider system. It includes our EDI practice externally, the ability to respond and influence external drivers for change, like the impact of Brexit, devolution or a change in government as well as issues like workforce development.

Current risk influencers

- HCPC fee rise decision has understandably not been popular with stakeholders, significant engagement work is underway to support continued productive relationships.
- We have successfully delivered a partnership project with a key stakeholder (HEE) resulting in strong working relationship.
- Collaboration with NHS employers to reach out to attendees of joining the UK workforce upstream events, contributing to the wider workforce agenda. Also, in this area we published our analysis of register retention improving understanding of attrition, preceptorship principles published and preparedness for practice research launched.
- Ops functions not resourced to respond as quickly as other regulators to urgent Government needs in increasingly complex environment or topical issues for stakeholder groups
- Professional liaison consultants in place in each of the 4 UK countries, improving our reach for engagement work.
- Strategic Relationship Lead in place and actively managing and supporting relationship managers' network. Engagement management group established to support more targeted forward planning for engagement.
- Business case for a CRM not taken forward in investment prioritisation for 2023-24. Over the year we will better scope our needs to make the case for the following years submission.

Mitigations in place

- ELT relationship building and liaison with key stakeholders particularly Government Departments, professional bodies, other regulators, unions.
- Personal engagement plans for Chair & Chief Executive in place. Engagement management group meets regularly to monitor and plan engagement strategically. Operational level relationship manager engagement for key stakeholders in place across HCPC.
- Communications and strategic engagement supported by external communication partner.
- Horizon scanning and intelligence gathering including from relationship building to be aware of external drivers and influencers, early planning, and scenario development.
- EDI strategy and action plan informed by independent audit of EDI practice. EDI stakeholder forum & internal EDI employee forum.
- Policy statement on approach to MOUs in place, a number of MOUs agreed with key stakeholders.
- Analysis and action planning from feedback mechanisms including corporate complaints, FtP stakeholder surveys, stakeholder opinion polling and education provider survey.
- Interim stakeholder CRM in place to improve stakeholder engagement management and insights.

Reporting period commentary

Risk owner - Claire Amor (ED GAP) is responsible for the PPI directorate in the interim period while a substantive post holder is recruited.
Risk influencers - Negative impact on perception due to fees consultation decision. Positive impact from more mature planning to engagement and PL 4 country reach.
Risk score - As previously reported, while positive work has taken place on mitigation which would otherwise reduce the risk score, the fee rise decision has had a negative impact on stakeholder sentiment and so the risk overall remains unchanged.
Planned mitigation - All planned mitigations have completed or will within target except for the service user engagement work. While commenced the majority of this work will now take place in 2023-24 and it is included in the 2023-24 corporate plan as a commitment.

Review date	Risk owner
Mar-23	ELT lead - Executive Director of Governance Assurance and Planning

	Impact	Likelihood	Risk Score	
Inherent risk	5	x	5	25
Current risk	4	x	3	12
Target risk (planned mitigations in place)	3	x	2	6

No change

Risk Appetite
Our risk appetite for actions related to communication and profile is seeks. Current risk is outside of appetite and needs to be within the amber range to come within appetite.

To meet our target, risk our new engagement approach needs to embed which involved organisation wide relationship managers, a central CRM system is required for this to be truly effective. The target also requires the scaling up of the Liaison service to have UK wide engagement. This risk is also dependent on being able to deliver stakeholder expectations such as more automated processes.

Current risk level is one level outside of risk appetite

Planned mitigations 2022-23	progress
Internal audit of our organisation-wide approach to EDI, with action to address any recommendations (Q4)	Complete, a number of low to medium recommendations made and responded to.
Introduce analysis of our Staff Survey results by protected characteristics (Q3)	Complete.
Introduce formal consideration of impact on our EDI objectives for all relevant ELT and Council decision (Q2)	All relevant papers include commentary on EDI issues.
Expansion of devolved relationships management model to cover a wider range of stakeholders and 4 country relationship management (Q2)	Complete – 4 country PL presence now in place.
Complete evaluation of initial year of devolved relationship management model (Q4)	Review completed and will inform development work in 2023-24.
Planning/scoping for service user engagement project (Q3)	Planning commenced; however, this will not complete in 22-23 it is included in the 23-24 corporate plan.
Dedicated communications plan to support fees consultation in planning (Q3-4)	Underway. Fees decision has been made, communication plan has moved into parliamentary phase.

Strategic risk 5 - The resources we require to achieve our strategy are not in place or are not sustainable

Risk summary
This risk includes not securing the resources we need to be effective and / or not being efficient and effective in our use of our resources (resources include financial, knowledge, skills, culture, infrastructure). It includes the development of our culture, people and physical assets, our continued financial viability and the significant failure of key business processes.

Current risk influencers

- PRC has recommended to Council a fully developed 23-24 budget that delivers a balanced position and prioritise set of investments, in accordance with budget principles earlier presented to Council. Greater integration of development of corporate and budget increases confidence in sustainability and affordability of ambitions.
- Council has approved fee rise with mitigations following consultation now seeking parliamentary approval.
- HCPC's last fee rise was reduced and delayed resulting in an impact on our medium to long term financial sustainability. Stakeholder lobbying against fee rise could lead to delay or reduction in amount. Risk being mitigated through active stakeholder engagement programme at senior level.
- Legal position on partners' employment status has crystallised, being addressed by dedicated Task and Finish Group. provision established subject to auditors' review.
- Project to review the HCPC's approach to working with our Partners (a key resource) has been launched, this will include aspects of efficiency and quality assurance.
- Launch of online registration applications and process changes from outsourced service learning have seen significant productivity gains.
- Competitive jobs market and financial constraints limit our ability to match market rate increases, impacting ability to secure the right skills/experience. Vacancies in some teams create some risks to delivery of planned priorities, including further improvements in financial planning.
- Sickness absence and turnover reducing. APDR participation made mandatory for pay award consideration. Employee pay policy and structure has been modernised, enables HCPC to be more competitive and greater clarity for employees.
- Senior leadership changes have the potential for cultural impact. Being mitigated by Interim leadership arrangements in place. Recruitment of replacement roles is underway with Employee involvement.
- Carbon baseline for HCPC now established action plan for improving sustainability being developed with expert input.
- Finance system replacement (BC) delayed, deferring benefits of from enabling further improvements in financial control, reporting and project accounting. Project now under way, with discovery phase complete and move into design and build.
- Follow up audit of Core Financial Controls has taken place has delivered a green/amber rating in light of remedial action taken.
- Preparation for 22-23 external audit has commenced with early auditor engagement to mitigate system limitations, including interim audit of expenditure up to end-Dec.
- Change and Benefits Forum being established, reporting to ELT to strengthen change management and ensure delivery of benefits.
- Rising inflation increases HCPC energy and other costs and HCPC employees cost of living pressures.
- Digital Transformation Strategy has been updated for relevance and changes approved by Council. Now being communicated to organisation.

Mitigations in place

- Adherence to budgeting and financial management and reporting processes which are subject to internal and external audit e.g. NAO. Finance business partner challenge and budget setting principles agreed by ELT to challenge the business on efficiency realisation. Business change function provides challenge on benefits outcomes of investment in new areas of work or enhancements to existing processes. Medium-Term Financial Strategy in place incorporating an efficiency action plan.
- All employees are set goals and objectives and undertake annual performance review which includes an assessment against our values (Fair, Compassionate, Inclusive, Enterprising) promoted through all employee performance system and seeks to identify training needs.
- HR includes a central learning and development function, which runs an annual learning and development plan for commonly identified skill and knowledge needs in addition to annual compliance training in areas such as data protection, bribery, EDI.
- Employee Forum acts as a consultation group for organisational change.
- Adherence to HR processes in relation to recruitment, annual performance development review and learning and development for Partners and employees.
- Effective IT system design maintaining confidentiality, integrity and availability of data. Digital transformation strategy provides roadmap for improving our IT systems.
- Maintenance of ISO27001 Information Security standard which is subject to external audit / Regular independent security assessments of key IT infrastructure. Maintenance of business continuity infrastructure and processes.
- ELT monthly monitoring of productivity of all departments through detailed performance reporting. KPIs reported to Committees and Council for oversight of performance and progress in meeting agreed milestones for corporate plan.
- Benefits management approach in place.

Reporting period commentary

Risk influencers - PRC has recommended to Council a fully developed 23-24 budget that delivers a balanced position and prioritise set of investments, in accordance with budget principles earlier presented to Council. Greater integration of development of corporate and budget increases confidence in sustainability and affordability of ambitions. Budget factors in projected future benefits of investments, to be validated at project initial phase and tracked to ensure deliver. This builds on our longer-term approach to business planning, focusing on benefits and sustainability with budget holder challenge and support / fee rise proposals have been consulted on and approved by Council now in parliamentary stage. This can be a lengthy process and uncertainty still remains.

Planned mitigations - expanding on our update on Environmental Sustainability Strategy we have engaged with consultants and across the organisation to develop our initial environmental emission calculations (covering a number of years) established a baseline position from which to measure future enhancements. A number of sessions have been held internally to update awareness and understanding including at Council Seminar, ELT and SLG meetings. Plans for further developments and prioritisation are progressing.

Review date	Risk owner
Mar-23	ELT - ED of Resources and Business Performance

	Impact	Likelihood	Risk Score	
Inherent risk	5	x	5	25
Current risk	4	x	4	16
Target risk (planned mitigations in place)	3	x	3	9

No change

Risk Appetite
Financial and Value for Money - how will we use our resources? – Measured
People - how will we lead our workforce? – Seeks

Current risk is outside risk appetite, the risk needs to be within the amber range.

To meet our target risk we need to have in place a robust finance and registration interface, a stable budget and forward planning process with a 2-3 year forward planning timeframe and we need to have enacted our People Strategy and have confidence it is effective. The target also requires our financial reserves to be in a better position and the resources avoid deficit budgets.

Current risk level is one level outside of risk appetite

Planned mitigations 2022-23	progress
Develop a comprehensive, strategic workforce plan (Q3)	HRBP's have commenced departmental workforce meetings with Heads. Discussions and planning are ongoing and will involve Finance Business Partners. Corporate induction has been revamped and has received positive feedback.
Review and relaunch our recruitment processes and induction programme to streamline onboarding (Q2-4)	Recruitment processes review underway with an emphasis to recruit directly with less reliance on agencies.
Introduce Aspiring Leaders programme to develop our future leaders to ready them for management roles. (Q3)	Complete - programme introduced and went live February 2023.
Review and update the Digital Transformation Strategy (Q3)	Complete. Council approved updated strategy in December 2022.
Modernisation of our IT infrastructure (Q3-4)	Ongoing – while this will never be complete due to the pace of change in this area, we have completed our aims for 2023-24.
Implement an upgrade to our financial system (Q4)	Initiation delayed but has now completed moving into build. Will complete in 2023-24.
Consult on increasing our fees (Q3-4)	Decision made on future registration fee levels following consultation. Now at parliamentary approval stage.
Establish a framework for change and benefits management (Q2)	New Change and Benefits Forum being established, reporting to ELT to strengthen change management and ensure delivery of benefits.
Develop an Environmental Sustainability Strategy and implement baseline analysis (Q3-4)	On track for completion by end of Q4.

Strategic risk 6 - HCPC is unable to realise the benefits of regulatory reform, or these benefits are significantly delayed

Risk summary

Regulatory reform is an essential component to helping HCPC realise its strategic ambition to provide a more human and compassionate regulation through the timely and proportionate disposal of fitness to practice cases. Benefits also include greater flexibility to make process efficiencies, greater control over funding to enable financial sustainability in the long term and modernise governance structures. This risk includes the HCPC's capacity and capability to engage and influence regulatory reform effectively to ensure its benefits are realised, as well as the HCPC being viewed by government as a priority regulator for reform.

Current risk influencers

- In its response to its consultation on regulatory reform, DHSC has confirmed that the HCPC and NMC will be the priority regulators for reform following the GMC.
- Regulatory reform included in 2023-24 corporate planning prioritisation and decision making process to ensure delivery remains achievable.
- Funding needed to progress regulatory reform internally not included in 2023-24 budget and will be funded by ringfencing any surplus in 22-23.
- HCPC funding challenges risk being unable to scale up to meet needs of regulatory reform due to parliamentary approval of fees and associated long process to achieve this.
- While HCPC has now been named as the next regulator to undergo reform there is not clarity at this stage on the timescales for this. We expect this clarity once DHSC has run its consultation on the GMC legislation. Lack of timescale challenges planning and scaling up of resources within HCPC dedicated to reform.
- HCPC provided feedback on, and participated in cross regulatory round table discussions, regarding the development of the GMC s.60 order which has now been launched for public consultation. HCPC will respond to the consultation formally.
- HCPC has engaged with DHSC on how the recommendations of KPMG on the future regulatory landscape may be taken forward. DHSC have indicated that this will not be progressed as a priority, with the S.60 taking priority.
- Government leadership changes, and challenges in the health landscape could impact on the progression of regulatory reform due to other priorities.
- Collaboration with stakeholders such as HEE provides organisational experience for greater cross organisational collaboration on workforce as aimed for in regulatory reform. Positive and wide-reaching engagement with HCPC stakeholders on regulatory reform.
- Though tone of recent PSA performance reports positive and acknowledge improvement efforts, PSA standards attainment could increase organisational vulnerability during a time of regulatory reform. PSA is currently undertaking a case audit to support its determination for the 2022-23 review.

Mitigations in place

- Communications and strategic engagement, including parliamentarians and cross-party engagement, on regulatory reform supported by Luther Pendragon.
- HCPC engagement on Health and Social Care Bill led to positive change.
- Some dedicated policy resource in place.
- Internal steering group meeting regularly.
- Participation in cross regulator analysis of draft legislation and other regulatory themes, HCPC's comments on draft legislation have been provided.
- Funding and resource required for progression of regulatory reform quantified within budget as a financial risk. Assessment of de-prioritisation of other development work undertaken to create capacity for regulatory reform.
- HCPC medium term financial plan in place to seek to make provision for regulatory reform. Consultation expected to launch Sept 22.

Reporting period commentary

Risk owner – now Andy Smith, Interim Deputy Chief Executive following departure of Chief Executive.

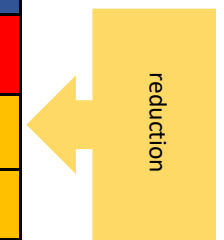
Risk score – DHSC have announced that the HCPC and NMC will be the next regulators to be prioritised for reform. This reduces the risk of significant delay to the HCPCs reforms. However, the financial risk posed has increased due to needing to scale up our internal resource to undertake the work required to capitalise on the opportunity of reform. Overall, a small reduction to the risk from 9 to 8.

Risk influencers – Positive impact of being officially named by DHSC as the next regulator to undergo reform. This provides more confidence that the changes we require to our legislation will not be significantly delayed. However negative impact as discussed above in risk score. There could be a need for a potentially significant level of additional resource. We are proactively seeking to mitigate this risk through active engagement with other regulators and DHSC, as well as through preparatory work being carried out within BAU resources. The budget includes a £300k contingency (approximately 1% of operating expenditure).

Review date
Mar-23

Risk owner
ELT lead - Interim Deputy Chief Executive

	Impact	Likelihood	Risk Score
Inherent risk	4	x 5	20
Current risk	4	x 2	8
Target risk (planned mitigations in place)	2	x 3	6



Risk Appetite

Our risk appetite for actions to achieve regulatory quality is open, the appetite for actions related to communication and profile is seeks.

Current risk is within appetite.

The target risk will be reached if the outcome of regulatory reform and the longer-term regulatory landscape review compliments and endorses the multi profession regulation model. This requires successful HCPC engagement and effective messaging. Risk reduction also required greater clarity on timing of HCPC's reform and confidence that funding and resources in place realise the opportunity of reform.

Current risk level is within risk appetite

Planned mitigations 2022-23	progress
Engagement with DHSC on regulatory reform as they develop GMC's legislation as a blueprint for our own. (Q2)	Responded to DHSC consultation, maintaining engagement with stakeholders.
Develop a Financial Sustainability Strategy (Q2)	Council has agreed to pursue a fee increase, which is now at parliamentary approval stage.
HCPC response to the consultation on regulation of physicians' associates (Q3)	Consultation was launched Feb 23 and will close May 23, response in development.
Detailed business case for resources needed for HCPC's regulatory reform go live (Q3)	Developed.

Risk Likelihood scoring

	Strategic	Programme/Project	Operational
Highly likely 5	"Clear and present danger" represented by this risk - will probably impact on this initiative - sooner rather than later.	Likely to occur in the life-cycle of the project, probably early on and perhaps more than once.	The threat is likely to happen almost every day.
Likely 4	Likely to happen at some point during the next one or two years.	Likely to happen in the life-cycle of the programme or project.	May well happen on a weekly basis.
Possible 3	May well occur during the lifetime of the strategy.	May occur during the life of the programme or project.	May well happen on a monthly basis.
Unlikely 2	Only small chance of occurring in the lifetime of the strategy.	Not likely to occur during the lifecycle of the programme of project.	Does not happen often - once every six months.
Highly unlikely 1	Extremely infrequent – unlikely to happen in a strategic environment or occur during a project or programmes lifecycle. May occur once a year or so in an operational environment.	Extremely infrequent – unlikely to happen in a strategic environment or occur during a project or programmes lifecycle. May occur once a year or so in an operational environment.	Extremely infrequent – unlikely to happen in a strategic environment or occur during a project or programmes lifecycle. May occur once a year or so in an operational environment.

Risk impact scoring

	Public Protection	Finance	Reputation	Operations	Strategy	Information Security
Catastrophic 5	A systematic failure for which HCPC is ultimately responsible. Exposes the public to serious harm in cases where mitigation was expected.	Unfunded pressures greater than £1 million.	Incompetence/ maladministration or other event that will destroy public trust or a key relationship.	Services to stakeholders are unavailable for an extended period of time (days)	Strategy rendered invalid	Significant breach of confidential information involving extensive quantities of data. Regulatory investigation required
Significant 4	A systematic failure for which HCPC is ultimately responsible. Exposes more than 10 people to harm in cases where mitigation was expected.	Unfunded pressures £250k - £1 million.	Incompetence/ maladministration that will undermine public trust or a key relationship for a sustained period or at a critical moment.	Services to stakeholders are unavailable for a significant period of time (hours)	Progress on multiple strategic objectives is stopped.	Significant breach of confidential information involving limited quantities of data. Regulatory investigation required.
Moderate 3	A systemic failure for which HCPC is ultimately responsible. Exposes more than 2 people to harm in cases when mitigation was expected.	Unfunded pressures £50,000 - £250,000.	Incompetence/ maladministration that will undermine public trust or a key relationship for a short period. Example Policy U-turn.	Services to stakeholders are significantly disrupted. Services are degraded or responses are slow for an extended period of time (days).	Progress on 1 strategic objective is stopped.	Limited breach of confidential information No regulatory investigation required
Minor 2	A systemic failure which results in inadequate protection for individuals/individual communities, including failure to resolve celebrity cases.	Unfunded pressures between £20,000-£50,000.	Event that will lead to widespread public criticism.	Services to stakeholders are disrupted. Services are degraded or responses are slow for a significant period of time (hours)	Progress on multiple strategic objectives is slowed.	Significant or widespread non-compliance to information security policy by employees. No breach of confidential information
Insignificant 1	A systemic failure which fails to address an operational requirement	Unfunded pressures under £20,000.	Event that will lead to public criticism by external stakeholders as anticipated.	Services to stakeholders are disrupted for a short period of time (minutes).	Progress on 1 strategic objective is slowed.	Minor or one-off non-compliance to information security policy by employees. No breach of confidential information

HCPC Risk Appetite - agreed February 2021

<p>Regulatory Quality - Open How will we deliver effective regulatory functions?</p>	<ul style="list-style-type: none"> • Our focus is on long term and lasting quality in our regulatory delivery. We have to take risk and challenge ourselves to achieve positive change. Sticking with a low-risk status quo will limit our progress. • We are open to risks that will further us in our aim of delivering excellent regulatory functions. • We are prepared to try new approaches that do not have a guarantee of success where the potential benefits of success outweigh the consequences of failure. • We proactively seek to reduce public protection risk through the promotion of professionalism and prevention. • The risks we are willing to take do not have a significant chance of long-term negative impacts on our regulatory quality. We accept that in striving for excellence and trying new approaches, short term issues may arise which we will seek to mitigate as best we can. • It is essential that mitigations to ensure ongoing public protection are in place as a foundation of taking risks to improve our regulatory quality.
<p>Compliance – Measured How will we comply with our statutory, regulatory and policy requirements?</p>	<ul style="list-style-type: none"> • We have a preference for safe delivery options that have a low degree of inherent risk and may only have limited potential for reward. • We are willing to take decisions that could be challenged only where we are confident we would be successful in defending against such challenge, and the adverse consequences of being unsuccessful are minimal. • We are willing to take low level risks of negative PSA performance impact given the appropriate controls are in place and we consider the potential benefits are required to maintain or improve our PSA standard performance. • It is essential that the long-term achievement of PSA standards is assured.
<p>Communication and Profile – Seeks How will we be viewed by our stakeholders?</p>	<ul style="list-style-type: none"> • We are eager to be innovative in content and method in order to communicate more effectively, despite greater inherent risk. • We are willing to express our views and communicate on issues where stakeholder opinion is divided, but where the HCPC has a legitimate voice and the Council has an agreed policy position. • In communicating our views, we are willing to accept the possibility of manageable reputational risk or a negative, but not irreversible, impact on a stakeholder relationship. • We acknowledge that being bold in communicating our position may lead to increased scrutiny from stakeholders. We accept this risk as being necessary to enable the HCPC to assert its voice and shape debate in the furtherance of excellence in regulation. • We seek meaningful two-way dialogue with our stakeholders, even where this may pose a risk to our profile due to uncomfortable feedback. • It is essential that the HCPC's voice is not perceived to be party political. The HCPC is neutral as a public body.
<p>People – Seeks How will we lead our workforce?</p>	<ul style="list-style-type: none"> • We are eager to be innovative and to choose options that increase our effectiveness as an organisation despite greater inherent risk. • We are prepared to accept risk as long as there is the potential for improving culture, recruitment and retention. • We want to innovate to improve our culture and working environment. • We are willing to review and restructure where this is needed, accepting the potential for short term disruption in order for the HCPC to benefit from better ways of working. • It is essential that risk taking in this area is consistent with the HCPC's values and culture. As an employer are committed to upholding and promoting Equality, Diversity and Inclusion.
<p>Financial and Value for Money – Measured How will we use our resources?</p>	<ul style="list-style-type: none"> • We are prepared to accept the possibility of limited financial loss where it does not have the potential to impact on our going concern. • Value for money is our primary concern in financial expenditure but we are willing to consider other benefits or constraints. • We are funded through registrant fees and we have a responsibility to ensure we invest cautiously to minimise loss while maximising benefit. • We accept that investments may be long term and take time to deliver rewards, appropriate benefit realisation monitoring is required to mitigate risk in investments. • It is essential we remain a financially viable organisation to ensure continued public protection through continued operation. Significant financial risks are not compatible with this requirement.